

TITLE V BLOCK GRANT APPLICATION
FORMS (2-21)
STATE: WA
APPLICATION YEAR: 2011

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FORM 2
MCH BUDGET DETAILS FOR FY 2011

[Secs. 504 (d) and 505(a)(3)(4)]

STATE: WA

1. FEDERAL ALLOCATION

(Item 15a of the Application Face Sheet [SF 424])
Of the Federal Allocation (1 above), the amount earmarked for:

\$ 9,002,043

A.Preventive and primary care for children:

\$ 2,995,068 (33.27%)

B.Children with special health care needs:

\$ 3,103,509 (34.48%)

(If either A or B is less than 30%, a waiver request must accompany the application)[Sec. 505(a)(3)]

C.Title V administrative costs:

\$ 900,204 (10%)

(The above figure cannot be more than 10%)[Sec. 504(d)]

2. UNOBLIGATED BALANCE (Item 15b of SF 424)

\$ 0

3. STATE MCH FUNDS (Item 15c of the SF 424)

\$ 7,573,626

4. LOCAL MCH FUNDS (Item 15d of SF 424)

\$ 14,000

5. OTHER FUNDS (Item 15e of SF 424)

\$ 1,500,000

6. PROGRAM INCOME (Item 15f of SF 424)

\$ 0

7. TOTAL STATE MATCH (Lines 3 through 6)

(Below is your State's FY 1989 Maintenance of Effort Amount)

\$ 7,573,626

\$ 9,087,626

8. FEDERAL-STATE TITLE V BLOCK GRANT PARTNERSHIP (SUBTOTAL)

(Total lines 1 through 6. Same as line 15g of SF 424)

\$ 18,089,669

9. OTHER FEDERAL FUNDS

(Funds under the control of the person responsible for the administration of the Title V program)

a. SPRANS: \$ 610,000

b. SSDI: \$ 100,000

c. CISS: \$ 140,000

d. Abstinence Education: \$ 0

e. Healthy Start: \$ 0

f. EMSC: \$ 0

g. WIC: \$ 0

h. AIDS: \$ 0

i. CDC: \$ 7,545,078

j. Education: \$ 0

k. Other: \$ 0

ARRA \$ 876,000

EHDDI \$ 191,899

Healthy Childcare WA \$ 350,000

Medicaid Fed & Other \$ 1,800,000

Oral Hlth Dent Ntwk \$ 500,000

SAMHSA ProjLaunch \$ 916,000

10. OTHER FEDERAL FUNDS (SUBTOTAL of all Funds under item 9)

\$ 13,028,977

11. STATE MCH BUDGET TOTAL

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 31,118,646

FORM NOTES FOR FORM 2

None

FIELD LEVEL NOTES

1. **Section Number:** Form2_Main

Field Name: OtherFedFundsOtherFund

Row Name: Other Federal Funds - Other Funds

Column Name:

Year: 2011

Field Note:

OMCH will lose \$1.1 million in funding from an interagency agreement for Healthy Childcare Washington. Funding will be terminated 12/31/10. Est. expenditures for 1 qtr FFY11 are \$350,000.

Additionally, ARRA funding is expected to continue into FFY11. This funding supports activities related to immunizations.

FORM 3
STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506(a)(1-3)]

STATE: WA

	FY 2006		FY 2007		FY 2008	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 9,556,668	\$ 9,158,038	\$ 9,151,423	\$ 8,693,717	\$ 9,151,423	\$ 8,357,457
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
3. State Funds <i>(Line3, Form 2)</i>	\$ 7,573,626	\$ 17,548,149	\$ 7,573,626	\$ 18,339,774	\$ 7,573,626	\$ 31,173,164
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 0	\$ 55,983	\$ 65,000	\$ 41,071	\$ 50,000	\$ 59,555
5. Other Funds <i>(Line5, Form 2)</i>	\$ 2,500,000	\$ 1,607,628	\$ 2,500,000	\$ 2,071,052	\$ 1,600,000	\$ 1,637,319
6. Program Income <i>(Line6, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
7. Subtotal	\$ 19,630,294	\$ 28,369,798	\$ 19,290,049	\$ 29,145,614	\$ 18,375,049	\$ 41,227,495
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 13,230,895	\$ 13,741,963	\$ 10,542,054	\$ 12,914,568	\$ 9,960,000	\$ 10,848,467
9. Total <i>(Line11, Form 2)</i>	\$ 32,861,189	\$ 42,111,761	\$ 29,832,103	\$ 42,060,182	\$ 28,335,049	\$ 52,075,962
(STATE MCH BUDGET TOTAL)						

FORM 3
STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506(a)(1-3)]

STATE: WA

	FY 2009		FY 2010		FY 2011	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 8,978,733	\$ 8,855,063	\$ 9,012,210		\$ 9,002,043	
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0		\$ 0	
3. State Funds <i>(Line3, Form 2)</i>	\$ 7,573,626	\$ 34,500,611	\$ 7,573,626		\$ 7,573,626	
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 107,000	\$ 67,031	\$ 45,000		\$ 14,000	
5. Other Funds <i>(Line5, Form 2)</i>	\$ 1,600,000	\$ 1,530,510	\$ 1,600,000		\$ 1,500,000	
6. Program Income <i>(Line6, Form 2)</i>	\$ 0	\$ 0	\$ 0		\$ 0	
7. Subtotal	\$ 18,259,359	\$ 44,953,215	\$ 18,230,836	\$ 0	\$ 18,089,669	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 11,722,622	\$ 10,621,552	\$ 13,182,963		\$ 13,028,977	
9. Total <i>(Line11, Form 2)</i>	\$ 29,981,981	\$ 55,574,767	\$ 31,413,799	\$ 0	\$ 31,118,646	\$ 0
(STATE MCH BUDGET TOTAL)						

FORM NOTES FOR FORM 3

None

FIELD LEVEL NOTES

1. **Section Number:** Form3_Main
Field Name: FedAllocExpended
Row Name: Federal Allocation
Column Name: Expended
Year: 2008
Field Note:
The variance is due to timing differences. Funding to local health jurisdictions which makes up over 60% of MCHBG showed that billings for approximately \$400,000 were not received and or paid during this period. Additional variance is due to other billings for contracts that were not paid during this period.
2. **Section Number:** Form3_Main
Field Name: StateMCHFundsExpended
Row Name: State Funds
Column Name: Expended
Year: 2009
Field Note:
The difference of 25,926,985 is due to expenditures from the Health Service Account (H.S.A.) Funds for vaccines. OMCH is allowed to budget only to its 1989 maintenance of effort. H.S.A. funds are then available for other match should the need arise. Washington State permits use of H.S.A. total expenditures in calculating data for the annual report. For FFY09, no other source was matched with H.S.A. funds.
3. **Section Number:** Form3_Main
Field Name: StateMCHFundsExpended
Row Name: State Funds
Column Name: Expended
Year: 2008
Field Note:
The large variance is due to an additional \$24 million in vaccine funding that was received during this period. OMCH can budget for only the maintenance of effort, but the office can report on the total amount expended.
4. **Section Number:** Form3_Main
Field Name: LocalMCHFundsExpended
Row Name: Local MCH Funds
Column Name: Expended
Year: 2009
Field Note:
The \$45,000 difference in budgeted versus expended is due to completion of local grants and non-renewal of funding.
5. **Section Number:** Form3_Main
Field Name: LocalMCHFundsExpended
Row Name: Local MCH Funds
Column Name: Expended
Year: 2008
Field Note:
OMCH underestimated the amount of local funds that would be used in this program.

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: WA

	FY 2006		FY 2007		FY 2008	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 1,560,079	\$ 1,712,128	\$ 1,167,581	\$ 1,654,486	\$ 1,108,941	\$ 1,529,542
b. Infants < 1 year old	\$ 3,800,143	\$ 6,554,002	\$ 4,022,080	\$ 7,777,543	\$ 4,245,011	\$ 12,086,863
c. Children 1 to 22 years old	\$ 6,492,167	\$ 11,093,663	\$ 7,094,408	\$ 10,543,388	\$ 7,185,339	\$ 15,210,415
d. Children with Special Healthcare Needs	\$ 6,229,421	\$ 7,227,732	\$ 5,848,937	\$ 6,999,920	\$ 4,681,384	\$ 9,998,999
e. Others	\$ 304,823	\$ 640,708	\$ 238,252	\$ 745,742	\$ 414,985	\$ 825,098
f. Administration	\$ 1,243,661	\$ 1,141,565	\$ 918,791	\$ 1,424,535	\$ 739,389	\$ 1,576,578
g. SUBTOTAL	\$ 19,630,294	\$ 28,369,798	\$ 19,290,049	\$ 29,145,614	\$ 18,375,049	\$ 41,227,495
II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	\$ 1,284,500		\$ 740,315		\$ 806,000	
b. SSDI	\$ 177,000		\$ 83,333		\$ 104,000	
c. CISS	\$ 0		\$ 0		\$ 0	
d. Abstinence Education	\$ 791,895		\$ 789,677		\$ 0	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 0		\$ 0		\$ 0	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 7,977,500		\$ 6,228,729		\$ 6,250,000	
j. Education	\$ 0		\$ 0		\$ 0	
k. Other						
Healthy Childcare WA	\$ 0		\$ 0		\$ 1,200,000	
Title XIX	\$ 1,800,000		\$ 1,500,000		\$ 1,600,000	
Interagency DSHS	\$ 1,200,000		\$ 1,200,000		\$ 0	
III. SUBTOTAL	\$ 13,230,895		\$ 10,542,054		\$ 9,960,000	

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: WA

	FY 2009		FY 2010		FY 2011	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 1,037,000	\$ 3,023,494	\$ 2,000,000	\$	\$ 2,925,000	\$
b. Infants < 1 year old	\$ 4,873,000	\$ 12,686,230	\$ 2,500,000	\$	\$ 2,373,000	\$
c. Children 1 to 22 years old	\$ 6,605,000	\$ 15,515,029	\$ 6,000,000	\$	\$ 4,518,454	\$
d. Children with Special Healthcare Needs	\$ 4,385,000	\$ 10,322,078	\$ 6,300,000	\$	\$ 5,798,000	\$
e. Others	\$ 468,000	\$ 1,364,755	\$ 230,836	\$	\$ 685,000	\$
f. Administration	\$ 891,359	\$ 2,041,629	\$ 1,200,000	\$	\$ 1,810,000	\$
g. SUBTOTAL	\$ 18,259,359	\$ 44,953,215	\$ 18,230,836	\$ 0	\$ 18,109,454	\$ 0
II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	\$ 838,000		\$ 1,485,000		\$ 610,000	
b. SSDI	\$ 100,000		\$ 94,644		\$ 100,000	
c. CISS	\$ 0		\$ 0		\$ 140,000	
d. Abstinence Education	\$ 0		\$ 814,663		\$ 0	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 0		\$ 0		\$ 0	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 7,575,522		\$ 8,788,656		\$ 7,545,078	
j. Education	\$ 0		\$ 0		\$ 0	
k. Other						
ARRA	\$ 0		\$ 0		\$ 876,000	
EHDDI	\$ 0		\$ 0		\$ 191,899	
Healthy Childcare WA	\$ 0		\$ 0		\$ 350,000	
Medicaid Fed & Other	\$ 0		\$ 0		\$ 1,800,000	
Oral Hlth Dent Ntwk	\$ 0		\$ 0		\$ 500,000	
SAMHSA ProjLaunch	\$ 0		\$ 0		\$ 916,000	
Child Care Blk ITEIP	\$ 0		\$ 1,100,000		\$ 0	
T19 XIX Fed	\$ 0		\$ 900,000		\$ 0	
Child Care IAR	\$ 1,200,000		\$ 0		\$ 0	
CP ITEIP	\$ 9,100		\$ 0		\$ 0	
Title XIX Fed	\$ 2,000,000		\$ 0		\$ 0	
III. SUBTOTAL	\$ 11,722,622		\$ 13,182,963		\$ 13,028,977	

FORM NOTES FOR FORM 4

None

FIELD LEVEL NOTES

1. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: PregWomenExpended
Row Name: Pregnant Women
Column Name: Expended
Year: 2009
Field Note:
Compared to FFY08, expenditures went from \$1.6 million to \$3.0 million representing a 94% increase in expenditures for pregnant women. Overall OMCH spent 9% more than the previous year. While timing differences are a consideration, a number of factors account for this. New funding for Oral Health, as well as increased spending in Genetics Services and other state level activities related to this population occurred. Additionally Local Health Jurisdictions spent more on this population. See Budget Narrative for further discussion.
2. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: PregWomenExpended
Row Name: Pregnant Women
Column Name: Expended
Year: 2008
Field Note:
Budget data is skewed because of the Health Services Account actual expenditure data, which cannot be projected other than meeting the maintenance of effort. Comparing FFY07 expenditures to FFY08, a 7.5% decrease occurred.
3. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: Children_0_1Budgeted
Row Name: Infants <1 year old
Column Name: Budgeted
Year: 2010
Field Note:
Washington State's Universal Vaccine program will transition to a tiered system.
4. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: Children_0_1Expended
Row Name: Infants <1 year old
Column Name: Expended
Year: 2009
Field Note:
For infants less than one year, spending increased by 4% over FFY08. Increased vaccine funds from the Health Services Account allocated to this population explains this variance. See Budget Narrative for further discussion.
5. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: Children_0_1Expended
Row Name: Infants <1 year old
Column Name: Expended
Year: 2008
Field Note:
The variance of almost double what was budgeted was due to Health Services Account funds that were used for vaccines. Washington State is a Universal Vaccine state. Funding for vaccines for infants comes from CDC Vaccines for Children funds and Health Services Account funds. OMCH can budget only for the Health Services Account funds that are used to meet the maintenance of effort. However, it can report on the total actual amount used.
6. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: Children_1_22Budgeted
Row Name: Children 1 to 22 years old
Column Name: Budgeted
Year: 2010
Field Note:
Washington State's Universal Vaccine program will transition to a tiered system in the 2009-2011 biennium.
7. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: Children_1_22Expended
Row Name: Children 1 to 22 years old
Column Name: Expended
Year: 2009
Field Note:
Overall, spending for this age group increase by 4% over FFY08. Spending increased by 9.9% in vaccines from the Health Services Account, while spending by LHJ's of MCHBG funds increased only 3.2% compared to FFY08. It is important to note that the award amount in MCHBG decreased by 1.2% over FFY08. The large increase in spending from the Health Services Account is due to an increase in funding for vaccines. The increased spending could mean vaccine costs increased and/or more children in this age group received vaccines.
8. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: Children_1_22Expended
Row Name: Children 1 to 22 years old
Column Name: Expended
Year: 2008
Field Note:
The variance of almost double what was budgeted was due to Health Services Account funds that were used for vaccines. Washington State is a Universal Vaccine state. Funding for vaccines for Children 1-22 comes from CDC Vaccines for Children funds and Health Services Account funds. OMCH can budget only for the Health Services Account funds that are used to meet the maintenance of effort. However, it can report on the total actual amount used.
9. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: CSHCNBudgeted
Row Name: CSHCN
Column Name: Budgeted
Year: 2010
Field Note:
Washington State's Universal Vaccine program will transition to a tiered system in the 2009-2011 biennium.
10. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: CSHCNExpended
Row Name: CSHCN
Column Name: Expended
Year: 2009
Field Note:

Overall spending increased by 3% for Children With Special Health Care Needs. Little change occurred in spending for vaccines for this population. For this population vaccine spending increased by 9.9% and spending by LHJ's increased by 2.2%. MCHBG award amounts to OMCH decreased by 1.2% for this period indicating that LHJ's were spending their allocations more rapidly. See Budget Narrative for further discussion.

11. Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: CSHCNExpended

Row Name: CSHCN

Column Name: Expended

Year: 2008

Field Note:

The variance of almost double what was budgeted was due to Health Services Account funds that were used for vaccines. Washington State is a Universal Vaccine state. Funding for vaccines for Children 1-22 comes from CDC Vaccines for Children funds and Health Services Account funds. OMCH can budget only for the Health Services Account funds that are used to meet the maintenance of effort. However, it can report on the total actual amount used.

12. Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: AllOthersBudgeted

Row Name: All Others

Column Name: Budgeted

Year: 2010

Field Note:

Funding for HPV in the Health Services Account will cease effective July 1, 2009; thus a decrease in vaccine expenditures is expected.

13. Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: AllOthersExpended

Row Name: All Others

Column Name: Expended

Year: 2009

Field Note:

Expenditures increased by 65% over FFY08 for activities related to other populations/individuals than the maternal and child population. Typically some expenditures do occur for individuals that fall beyond our population. Often this is due to individuals such as grandparents who may be caring for a child and receive a service related to that child.

14. Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: AllOthersExpended

Row Name: All Others

Column Name: Expended

Year: 2008

Field Note:

The variance is due to expenditures for two federal grants that addressed genetics services and systems to the total Washington State population. In the case of vaccines, Washington State is a Universal Vaccine state, so individuals outside of the MCH population received vaccines for such immunizations as human papillomavirus.

15. Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: AdminBudgeted

Row Name: Administration

Column Name: Budgeted

Year: 2010

Field Note:

Administrative costs will increase by 2.2%.

16. Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: AdminExpended

Row Name: Administration

Column Name: Expended

Year: 2009

Field Note:

Administrative expenditures increased during this period due to capturing other overhead amounts (Indirects). Administrative indirect rates are projected to decrease in FFY11.

17. Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: AdminExpended

Row Name: Administration

Column Name: Expended

Year: 2008

Field Note:

The variance of double the amount budgeted is due to budgeting based on FFY06 actual expenditures. Significant additional funding for vaccines in the state Health Services Account increased the administrative costs associated with this account. Actual expenditures for FFY07 and FFY08 stayed relatively unchanged.

FORM 5
STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: WA

TYPE OF SERVICE	FY 2006		FY 2007		FY 2008	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 1,045,526	\$ 196,426	\$ 743,000	\$ 402,832	\$ 127,225	\$ 422,404
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 3,315,031	\$ 3,866,815	\$ 2,535,000	\$ 3,779,034	\$ 2,504,527	\$ 3,435,185
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 9,431,902	\$ 15,822,509	\$ 11,006,000	\$ 15,918,268	\$ 10,248,200	\$ 27,828,579
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 5,837,835	\$ 8,484,048	\$ 5,006,049	\$ 9,045,480	\$ 5,495,097	\$ 9,541,327
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 19,630,294	\$ 28,369,798	\$ 19,290,049	\$ 29,145,614	\$ 18,375,049	\$ 41,227,495

FORM 5
STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: WA

TYPE OF SERVICE	FY 2009		FY 2010		FY 2011	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 232,000	\$ 622,057	\$ 1,600,000	\$	\$ 655,000	\$
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 2,045,000	\$ 3,643,033	\$ 4,200,000	\$	\$ 3,836,000	\$
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 10,234,000	\$ 30,323,855	\$ 5,430,836	\$	\$ 2,706,000	\$
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 5,748,359	\$ 10,364,270	\$ 7,000,000	\$	\$ 10,912,454	\$
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 18,259,359	\$ 44,953,215	\$ 18,230,836	\$ 0	\$ 18,109,454	\$ 0

FORM NOTES FOR FORM 5

None

FIELD LEVEL NOTES

- 1. Section Number:** Form5_Main
Field Name: DirectHCBudgeted
Row Name: Direct Health Care Services
Column Name: Budgeted
Year: 2010
Field Note:
Projections for 2010 came from past responses to economic downturns, specifically FFY 2003, 2004, and 2005 where expenditures were greater than predicted. Analyzing the total for Direct Health Care Services, Enabling and Infrastructure Building (Population Based Services were not included in the calculation because vaccine expenditures skew the percentages), Direct Services make up almost 12%. With reductions in funding at the local level, OMCH expects a shift in MCH expenditures to offset these losses.
- 2. Section Number:** Form5_Main
Field Name: DirectHCExpended
Row Name: Direct Health Care Services
Column Name: Expended
Year: 2009
Field Note:
When OMCH developed estimates for FFY09, the office expected a continued slight decrease in Direct Services. This increase is due to unanticipated state proviso funding for Miscarriage Management. For LHJ's, who receive most of the MCHBG award, there was a 78% decrease in Direct Services. Analysis reveals shifts in LHJ spending to Enabling, Population Based Services and Infrastructure. See Budget Narrative for further discussion.
- 3. Section Number:** Form5_Main
Field Name: DirectHCExpended
Row Name: Direct Health Care Services
Column Name: Expended
Year: 2008
Field Note:
Expenditures for 2006 showed a sharp decrease in amounts used for Direct Services. This reduction was due to decisions made by OMCH in response to Title V award reductions. Consequently, OMCH expected to see a continued downward trend in this category. When the FFY08 budget was built, the drastic national and local downturn in the economy was not anticipated.
- 4. Section Number:** Form5_Main
Field Name: EnablingExpended
Row Name: Enabling Services
Column Name: Expended
Year: 2009
Field Note:
When OMCH developed the budget in FFY08 for FFY09, the office anticipated that relative to other expenditures, a slight decrease would occur in FFY09. For the LHJ's who receive over 60% of MCHBG funding, an increase of 13.7% in spending occurred over FFY08. This change coupled with the significant decrease in direct services indicates that LHJ's may have taken advantage of the flexibility of MCHBG funding to assure clients were connected to services in other entities. See Budget Narrative for further discussion.
- 5. Section Number:** Form5_Main
Field Name: EnablingExpended
Row Name: Enabling Services
Column Name: Expended
Year: 2008
Field Note:
The variance is approximately 37%. OMCH estimated that increased state emphasis on Population Based and Infrastructure Building Services in response to decreased funding availability would reduce overall expenditures. The office projected that other resources would be used at the local level. This has not been the case. When funding pressure increased local health jurisdictions did not decrease Enabling Services as much as predicted. Finally, a contract with the state Medicaid program resulted in 57% less in federal match. Enabling Services were part of the activities in this contract.
- 6. Section Number:** Form5_Main
Field Name: PopBasedExpended
Row Name: Population-Based Services
Column Name: Expended
Year: 2009
Field Note:
In developing projections for FFY09, actual expenditure data from FFY07 indicated a slight increase in expenditures. Overall spending for FFY09 increased by 8.9% in Population Based Services. This was due to a significant increase in vaccine funds at the state level. Within LHJ spending, a 12.8% increase occurred over FFY08. See Budget Narrative for further discussion.
- 7. Section Number:** Form5_Main
Field Name: PopBasedExpended
Row Name: Population-Based Services
Column Name: Expended
Year: 2008
Field Note:
The large variance of over double the budgeted amount is due to the substantial increase in funding for vaccines during this period. As in the past, OMCH is able to project state match for only the maintenance of effort. State vaccine funding used as match for actual expenditures outstrips what the office can project.
- 8. Section Number:** Form5_Main
Field Name: InfrastrBuildExpended
Row Name: Infrastructure Building Services
Column Name: Expended
Year: 2009
Field Note:
OMCH projections for FFY09 were for an increase in Infrastructure expenditures. Increases were greater than expected. Overall OMCH experienced a 8.6% increase in expenditures. For LHJ's there was an almost 17% increase in expenditures over FFY08. For further discussion see Budget Narrative.
- 9. Section Number:** Form5_Main
Field Name: InfrastrBuildExpended
Row Name: Infrastructure Building Services
Column Name: Expended
Year: 2008
Field Note:
When the budget was built in 2006, OMCH expected continued reductions in federal funding which would result in Infrastructure Building funds flattening. Additionally, the large amount of expenditures in Population Based Services skewed the projections. Finally, Medicaid federal match was only 57% of that projected. Negotiation of a

contract with the state Medicaid program resulted in decreased recovered expenditures.

FORM 6

NUMBER AND PERCENTAGE OF NEWBORNS AND OTHERS SCREENED, CASES CONFIRMED, AND TREATED

Sect. 506(a)(2)(B)(iii)

STATE: WA

Total Births by Occurrence: 86,718

Reporting Year: 2008

Type of Screening Tests	(A) Receiving at least one Screen (1)		(B) No. of Presumptive Positive Screens	(C) No. Confirmed Cases (2)	(D) Needing Treatment that Received Treatment (3)	
	No.	%			No.	%
Phenylketonuria	86,058	99.2	6	3	3	100
Congenital Hypothyroidism	86,058	99.2	133	83	83	100
Galactosemia	86,058	99.2	2	0	0	
Sickle Cell Disease	86,058	99.2	9	9	9	100
Other Screening (Specify)						
Biotinidase Deficiency	86,058	99.2	0	0	0	
Cystic Fibrosis	86,058	99.2	48	16	16	100
Homocystinuria	86,058	99.2	4	0	0	
Maple Syrup Urine Disease	86,058	99.2	2	2	1	50
21-Hydroxylase Deficient Congenital Adrenal Hyperplasia	86,058	99.2	72	8	8	100
Medium-Chain Acyl-CoA Dehydrogenase Deficiency	86,058	99.2	7	5	5	100

Screening Programs for Older Children & Women (Specify Tests by name)

- (1) Use occurrent births as denominator.
 (2) Report only those from resident births.
 (3) Use number of confirmed cases as denominator.

FORM NOTES FOR FORM 6

These data come from the Department of Health, Office of Newborn Screening database (updated monthly). The numerator is the number of live births in Washington that were reported as screened by the Office of Newborn Screening. The denominator is the number of live births in Washington. Infants born on U.S. Military Installations are excluded. For 2008, the total excludes 3,303 newborns— 3,077 military, 157 who died prior to screening, 21 who were screened in the state of Oregon and 48 refusals. The state currently screens for PKU, congenital hypothyroidism, galactosemia, sickle cell disease, congenital adrenal hyperplasia, MCAD deficiency, biotinidase, maple syrup urine disease (MSUD), Cystic Fibrosis and homocystinuria.

Numerator = 84,925

Denominator = 84,925 – Exclusions (226) – Military (3,077) = 85,641

When newborns are screened for the conditions listed above, they can show a positive result, however some of these may be false positives due to a variety of factors. The confirmed cases are those who are true positives and have been verified as accurate.

FIELD LEVEL NOTES

1. **Section Number:** Form6_Main

Field Name: Congenital_Presumptive

Row Name: Congenital

Column Name: Presumptive positive screens

Year: 2011

Field Note:

The increase in the number of presumptive screens since last year is primarily a result of the performance of the specific laboratory kit - they change 2 to 3 times a year

2. **Section Number:** Form6_Main

Field Name: Congenital_Confirmed

Row Name: Congenital

Column Name: Confirmed Cases

Year: 2011

Field Note:

The reason for the increase in Congenital Hypothyroidism is unknown. Whether increase is due to random variation or a real increase has yet to be determined. We will monitor in future years.

3. **Section Number:** Form6_Main

Field Name: SickleCellDisease_Confirmed

Row Name: SickleCellDisease

Column Name: Confirmed Cases

Year: 2011

Field Note:

All presumptive cases of sickle cell disease were confirmed by testing.

FORM 7
NUMBER OF INDIVIDUALS SERVED (UNDUPLICATED) UNDER TITLE V
(BY CLASS OF INDIVIDUALS AND PERCENT OF HEALTH COVERAGE)

[Sec. 506(a)(2)(A)(i-ii)]

STATE: WA

Reporting Year: 2008

Types of Individuals Served	TITLE V	PRIMARY SOURCES OF COVERAGE				
	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	19,140	93.7		3.2	3.1	
Infants < 1 year old	88,800	48.0		48.8	3.2	
Children 1 to 22 years old	416,899	32.4	2.1	55.9	9.6	
Children with Special Healthcare Needs	12,143	78.3		15.7	6.0	
Others	15,943	47.9		22.9	29.2	
TOTAL	552,925					

FORM NOTES FOR FORM 7

Total Served: Total served is the unduplicated total number of individuals receiving a direct service from the Title V program. The number of pregnant women served, children with special health care needs served, and others served comes from reporting of direct services by local health jurisdictions (LHJs) across the state. The number of infants < 1 year of age served is the number of resident live births (families of these children are sent CHILD Profile health promotion materials). The number of children ages 1 to 22 served includes those children ages 1 to 6 that are sent CHILD Profile Health promotion materials through the mail. In order to minimize the effect of duplication of count with the number of children served by LHJs in a variety of service and referral programs that include health promotion, only 50% of the children reported served by LHJs are added to the number of children receiving CHILD Profile packets. (50% was the estimate that was arrived at as the percent of children who are 1-6 years of age that make up part of the total number of children 1-22 years old served by LHJs.)

Primary Source of Coverage: These data were obtained through LHJs; Medicaid Management Information System (MMIS) eligibility files, Medical Assistance Administration (MAA), Washington State Department of Social and Health Services; First Steps Database, Washington Department of Social and Health Services; and the Washington State Office of Financial Management.

FIELD LEVEL NOTES

None

FORM 8
DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE
XIX
(BY RACE AND ETHNICITY)
[SEC. 506(A)(2)(C-D)]
STATE: WA

Reporting Year: 2008

I. UNDUPLICATED COUNT BY RACE

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
DELIVERIES								
Total Deliveries in State	88,800	59,739	3,394	1,609	7,438	955	4,265	11,400
Title V Served	19,140	12,876	732	347	1,603	206	919	2,457
Eligible for Title XIX	42,629	24,237	2,336	1,258	1,974	636	2,636	9,552
INFANTS								
Total Infants in State	90,334	60,886	3,447	1,627	7,560	962	4,336	11,516
Title V Served	86,658	58,408	3,307	1,561	7,252	923	4,160	11,047
Eligible for Title XIX	43,163	24,571	2,372	1,273	1,989	639	2,678	9,641

II. UNDUPLICATED COUNT BY ETHNICITY

HISPANIC OR LATINO (Sub-categories by country or area of origin)								
	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
DELIVERIES								
Total Deliveries in State	69,902	17,197	1,701	14,017	106	464		2,779
Title V Served	15,067	3,707	367	3,021	23	100		599
Eligible for Title XIX	28,043	13,832	754	11,794	49	248		1,858
INFANTS								
Total Infants in State	71,211	17,391	1,732	14,166	107	474		2,814
Title V Served	68,313	16,683	1,662	13,590	103	455		2,699
Eligible for Title XIX	28,409	13,986	768	11,917	50	254		1,883

FORM NOTES FOR FORM 8

Total Deliveries in State:

The population-based total of all resident deliveries occurring in Washington State for 2008 was obtained from the First Steps Database (FSDB), Washington State Department of Social and Health Services using 2008 Washington State Birth Certificate Files. The FSDB number of deliveries is unduplicated by woman (in the case of multiple births) and includes fetal deaths.

Title V Served: No contractors are using Maternal and Child Health funds for direct prenatal care, delivery and postpartum services. This number represents the total number of pregnant women served by all local health jurisdictions (LHJs) in 2008, and was reported in Form 7.

Eligible for XIX: Those eligible for Title XIX were determined by the number of Medicaid deliveries, by race and ethnicity, reported in the First Steps Database, Washington State Department of Social and Health Services. These data reflect Washington State residents.

Total Infants in State:

The population-based total of all infants (<1year old) by race in Washington State for 2009 was derived from the total number of births by residents in the state by maternal race from the Washington State Birth Certificate files. The number of infants is computed by counting all live born infants (fetal deaths are excluded).

Title V Served: The total number of infants served under Title V is the number of infants receiving newborn screening in 2008, as reported on Form 6. These data were obtained from the Newborn Screening Program, Washington State Department of Health Public Health Laboratories.

Eligible for XIX: Those eligible for Title XIX were determined by the number of births reported by Medicaid status, maternal race, and maternal ethnicity in the First Steps Database, Washington State Department of Social and Health Services.

FIELD LEVEL NOTES

1. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTotal_TotalHispanic

Row Name: Total Deliveries in State

Column Name: Total Hispanic or Latino

Year: 2011

Field Note:

Total Hispanic/Latino may not be equal to the sub-categories. Some of the birth certificate records have multiple ethnicities indicated, so subtotals are not mutually exclusive.

2. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTotal_CentralAmerican

Row Name: Total Deliveries in State

Column Name: Central and South American

Year: 2011

Field Note:

n/a

3. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleV_TotalHispanic

Row Name: Title V Served

Column Name: Total Hispanic or Latino

Year: 2011

Field Note:

Total Hispanic/Latino may not be equal to the sub-categories. Some of the birth certificate records have multiple ethnicities indicated, so subtotals are not mutually exclusive.

4. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleXIX_TotalHispanic

Row Name: Eligible for Title XIX

Column Name: Total Hispanic or Latino

Year: 2011

Field Note:

Total Hispanic/Latino may not be equal to the sub-categories. Some of the birth certificate records have multiple ethnicities indicated, so subtotals are not mutually exclusive.

5. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: InfantsTotal_TotalHispanic

Row Name: Total Infants in State

Column Name: Total Hispanic or Latino

Year: 2011

Field Note:

Total Hispanic/Latino may not be equal to the sub-categories. Some of the birth certificate records have multiple ethnicities indicated, so subtotals are not mutually exclusive.

6. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleV_TotalHispanic

Row Name: Title V Served

Column Name: Total Hispanic or Latino

Year: 2011

Field Note:

Total Hispanic/Latino may not be equal to the sub-categories. Some of the birth certificate records have multiple ethnicities indicated, so subtotals are not mutually exclusive.

7. Section Number: Form8_II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleXIX_TotalHispanic

Row Name: Eligible for Title XIX

Column Name: Total Hispanic or Latino

Year: 2011

Field Note:

Total Hispanic/Latino may not be equal to the sub-categories. Some of the birth certificate records have multiple ethnicities indicated, so subtotals are not mutually exclusive.

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL)
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: WA

	FY 2011	FY 2010	FY 2009	FY 2008	FY 2007
1. State MCH Toll-Free "Hotline" Telephone Number	_____	_____	_____	_____	_____
2. State MCH Toll-Free "Hotline" Name					
3. Name of Contact Person for State MCH "Hotline"	_____	_____	_____	_____	_____
4. Contact Person's Telephone Number	_____	_____	_____	_____	_____
5. Contact Person's Email	_____	_____	_____	_____	_____
6. Number of calls received on the State MCH "Hotline" this reporting period	_____ 0	_____ 0	_____ 0	_____ 0	_____ 0

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: WA

	FY 2011	FY 2010	FY 2009	FY 2008	FY 2007
1. State MCH Toll-Free "Hotline" Telephone Number	<u>800-322-2588</u>	<u>800-322-2588</u>	<u>800-322-2588</u>	<u>800-322-2588</u>	<u>800-322-2588</u>
2. State MCH Toll-Free "Hotline" Name	Family Health Hotline	Family Health	Family Health	Family Health	Family Health
3. Name of Contact Person for State MCH "Hotline"	<u>Beth Anderson</u>	<u>Beth Anderson</u>	<u>Riley Peters</u>	<u>Candi Wines</u>	<u>Candi Wines</u>
4. Contact Person's Telephone Number	<u>(360) 236-3459</u>	<u>(360) 236-3459</u>	<u>(360) 236-3581</u>	<u>(360) 236-3459</u>	<u>(360) 236-3459</u>
5. Contact Person's Email	<u>beth.anderson@doh.wa.gov</u>	<u>beth.anderson@doh.wa.gov</u>	<u></u>	<u></u>	<u></u>
6. Number of calls received on the State MCH "Hotline" this reporting period	<u>0</u>	<u>0</u>	<u>20,920</u>	<u>23,920</u>	<u>24,395</u>

FORM NOTES FOR FORM 9
None
FIELD LEVEL NOTES
None

FORM 10
TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT
STATE PROFILE FOR FY 2011
[SEC. 506(A)(1)]
STATE: WA

1. State MCH Administration:
(max 2500 characters)

The Department of Health (DOH) administers the MCH Block Grant in Washington State. The Office of Maternal and Child Health (OMCH) is located in the Division of Community and Family Health, one of four divisions in DOH. There are six sections in OMCH: Administration, Assessment, Children with Special Health Care Needs, Genetic Services, Immunization Program CHILD Profile, and Maternal, Infant, Child and Adolescent Health. These sections mainly focus on infrastructure building. Direct health care services, enabling services, and population-based services are provided by 35 local health jurisdictions and other agencies in Washington State who receive block grant funds to support this work.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ 9,002,043
3. Unobligated balance (Line 2, Form 2)	\$ 0
4. State Funds (Line 3, Form 2)	\$ 7,573,626
5. Local MCH Funds (Line 4, Form 2)	\$ 14,000
6. Other Funds (Line 5, Form 2)	\$ 1,500,000
7. Program Income (Line 6, Form 2)	\$ 0
8. Total Federal-State Partnership (Line 8, Form 2)	\$ 18,089,669

9. Most significant providers receiving MCH funds:

Local Health Jurisdictions
University of Washington
Neurodevelopmental Centers
Seattle Children's Hospital

10. Individuals served by the Title V Program (Col. A, Form 7)

a. Pregnant Women	19,140
b. Infants < 1 year old	88,800
c. Children 1 to 22 years old	416,899
d. CSHCN	12,143
e. Others	15,943

11. Statewide Initiatives and Partnerships:

a. Direct Medical Care and Enabling Services:
(max 2500 characters)

First Steps: First Steps, a collaboration between the Office of Maternal and Child Health (OMCH) and Medicaid Purchasing Administration (MPA) targets Medicaid women in high risk pregnancies and helps them and their infants receive health and social services. Program components include referral to prenatal care and support and interventions for pregnant Medicaid women at risk for adverse outcomes and their infants up to age one. OMCH assists MPA in administering three parts of First Steps: Maternity Support Services, Infant Case Management and Childbirth Education. With this program, OMCH influences the delivery of health promotion/disease prevention messages and other interventions to mitigate risk factors. Access to Baby and Child Dentistry (ABCD): This program focuses on access to preventive and restorative dental care for Medicaid-eligible children from birth through age five. It is a partnership with Medicaid, the University of Washington School of Dentistry, the Washington Dental Foundation, local health districts and oral health coalitions. The program provides a system of referrals for dental care. OMCH's Oral Health unit in OMCH funds the program and has helped establish a referral service of dental providers to see very young children through the ABCD program.

b. Population-Based Services:
(max 2500 characters)

Child Profile Health Promotion System: CHILD Profile, a unique health promotion system in the nation, mails health promotion materials to Washington households with young children. Seventeen mailings are sent to the households with children from birth through age six. The material, available in a variety of languages, covers a broad variety of health topics. Partners with expertise in many areas help develop CHILD Profile Health Promotion materials. The broad based CHILD Profile Advisory Group provides input for decision making on CHILD Profile policy and planning activities. Universal vaccine program: Washington's universal vaccination policy provides vaccine to all Washington children, from birth to age 18, at no cost to recipients. Approximately 1200 clinic sites participate in the state's universal vaccine system. The system helps reduce access barriers to vaccines by bringing together federal and state funds to purchase and distribute all routinely recommended vaccines for all children through age 18. In 2009, this program was faced with mandated state general fund budget cuts. In 2010, a new law was enacted to save the universal vaccine purchasing and distribution system. Under this law, the state's insurers and health plans proportionally contribute to a fund used to purchase vaccine for children who are covered by private insurance. The Early Hearing-loss Detection, Diagnosis and Intervention (EHDDI) program is a collaborative effort in Washington. Newborn hearing screening is not mandated. Even so, over 95% of infants born in Washington are screened in the hospital. The program has been developing outreach programs to improve screening in the home birth population.

c. Infrastructure Building Services:
(max 2500 characters)

Neurodevelopmental Centers (NDC): the Children with Special Health Care Needs (CSHCN) program provides funding to support the infrastructure of 15 NDCs across the state. NDCs provide evaluation, diagnosis, coordinated treatment planning, and specialized therapy to children with a variety of developmental or neurodevelopmental conditions. These non-profit centers depend on funding from the state and other sources to provide a structure for specialty services. Early Childhood Comprehensive Systems (ECCS)/ Kids Matter: ECCS is a broad based, public-private partnership to integrate all systems targeting early childhood. OMCH's partners include the Department of Early Learning, Head Start, Thrive by Five Washington, the Office of the Superintendent of Public Instruction, Foundation for Early Learning, Reach Out and Read and many others. Critical ECCS components are: 1) health, 2) social-emotional development and children's mental health, 3) early care and education/child care, and 4) parenting and family support. Through ECCS, OMCH works to coordinate systems to improve health and health care in early childhood. Washington State's outcome-based early childhood systems framework, Kids Matter, was created and is supported by many public and private partners in early childhood across the state. The purpose of Kids Matter is to help create and sustain a statewide early childhood comprehensive system to meet the needs of children and families, improve outcomes, and assure that all children are healthy and ready for

school. ECCS and Kids Matter are helping the state move forward by developing a useful framework, supporting collaboration, and connecting the components of a currently fragmented system

12. The primary Title V Program contact person:

Name	Riley Peters, PhD
Title	Office Director
Address	PO Box 47835
City	Olympia
State	WA
Zip	98504-7835
Phone	360-236-3581
Fax	360-236-2323
Email	riley.peters@doh.wa.gov
Web	http://www.doh.wa.gov/cfh/mch/default.htm

13. The children with special health care needs (CSHCN) contact person:

Name	Maria Nardella
Title	CSHCN Office Manager
Address	PO Box 47880
City	Olympia
State	WA
Zip	98504-7880
Phone	360-236-3573
Fax	360-586-7868
Email	maria.nardella@doh.wa.gov
Web	http://www.doh.wa.gov/cfh/mch/default.htm

FORM NOTES FOR FORM 10

None

FIELD LEVEL NOTES

None

FORM 11
TRACKING PERFORMANCE MEASURES
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]
STATE: WA

Form Level Notes for Form 11

None

PERFORMANCE MEASURE # 01

The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their State-sponsored newborn screening programs.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	95	100	100	100	100
Annual Indicator	100.0	98.9	100.0	99.2	
Numerator	99	91	89	125	
Denominator	99	92	89	126	
Data Source				WA Newborn Screening Program	
Do not report the numerator because there were fewer than 5 events over the last year, and the 3-year moving average over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. Section Number: Form11_Performance Measure #1

Field Name: PM01

Row Name:

Column Name:

Year: 2009

Field Note:

Data not available.

2. Section Number: Form11_Performance Measure #1

Field Name: PM01

Row Name:

Column Name:

Year: 2008

Field Note:

PERFORMANCE OBJECTIVES: The Newborn Screening program expects to maintain 100% of screen positive newborns receiving timely follow up. Therefore, for the period of 2008-2014, the future objectives will be 100%.

The percent of newborns in the state with at least one screening for each of PKU, hypothyroidism, hemoglobinopathies, and congenital adrenal hyperplasia with appropriate referral. Over time laboratory cutoffs have been adjusted for some conditions to decrease the detection of infants with conditions that are NOT clinically significant and don't require treatment.

These data come from the WA Newborn Screening Program and are the same as reported in Form 6. The numerator is the number of live births in Washington that were reported by the Office of Newborn Screening as screened and were a confirmed case that received timely follow up. The denominator is the number that were screened and were a confirmed case. In 2008, 99.2% of newborns received a newborn screening (86,058 of 86,718). Excluded from the denominator were births in military hospitals (3,365), refusals (92), neo-natal deaths (127) and a small number tested by the State of Oregon (16). Washington State currently screens for PKU, congenital hypothyroidism, galactosemia, sickle cell disease, congenital adrenal hyperplasia, MCAD deficiency, biotinidase, maple syrup urine disease (MSUD), homocystinuria and Cystic Fibrosis. See Form 6 for details on screening for each condition.

3. Section Number: Form11_Performance Measure #1

Field Name: PM01

Row Name:

Column Name:

Year: 2007

Field Note:

PERFORMANCE OBJECTIVES: The Newborn Screening program expects to maintain 100% of screen positive newborns receiving timely follow up. Therefore, for the period of 2008-2013, the future objectives will be 100%.

The percent of newborns in the state with at least one screening for each of PKU, hypothyroidism, hemoglobinopathies, and congenital adrenal hyperplasia with appropriate referral. Over time laboratory cutoffs have been adjusted for some conditions to decrease the detection of infants with conditions that are NOT clinically significant and don't require treatment.

These data come from Form 6. The numerator is the number of live births in Washington that were reported by the Office of Newborn Screening as screened and were a confirmed case that received timely follow up. The denominator is the number that were screened and were a confirmed case. In 2007, 99.2% of newborns received a

newborn screening (84,925 of 85,641). Excluded from the denominator were births in military hospitals (3,077), refusals (48), neo-natal deaths (157) and a small number tested by the State of Oregon (21). Washington State currently screens for PKU, congenital hypothyroidism, galactosemia, sickle cell disease, congenital adrenal hyperplasia, MCAD deficiency, biotinidase, maple syrup urine disease (MSUD), homocystinuria and Cystic Fibrosis. See Form 6 for details on conditions.

PERFORMANCE MEASURE # 02

The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)

	Annual Objective and Performance Data				
	2005	2006	2007	2008	2009
Annual Performance Objective	<u>56</u>	<u>56.5</u>	<u>57</u>	<u>55.7</u>	<u>55.7</u>
Annual Indicator	<u>54.9</u>	<u>54.9</u>	<u>55.7</u>	<u>55.7</u>	<u>55.7</u>
Numerator	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>
Denominator	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>
Data Source				National Survey of CSHCN	National Survey of CSHCN
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. <i>(Explain data in a year note. See Guidance, Appendix IX.)</i>					
Is the Data Provisional or Final?				Final	Final

	Annual Objective and Performance Data				
	2010	2011	2012	2013	2014
Annual Performance Objective	<u>55.7</u>	<u>55.7</u>	<u>55.7</u>	<u>55.7</u>	<u>55.7</u>
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #2**Field Name:** PM02**Row Name:****Column Name:****Year:** 2009**Field Note:**

Indicator data come from the National Survey of CSHCN, conducted every 5 years by HRSA and CDC. The most recent data are from the 2005-2006 survey. The same questions were used to generate the NPM02 indicator for both the 2001 and the 2005-2006 CSHCN survey. Annual performance objective falls within the 95% confidence interval of the current rate. In 2007, following the release of the most recent survey, discussions with program staff led to the target of 55.7% to be established through 2014.

Data come from survey and state numerator/denominator are not available.

2. Section Number: Form11_Performance Measure #2**Field Name:** PM02**Row Name:****Column Name:****Year:** 2008**Field Note:**

Indicator data come from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM02 indicator for both the 2001 and the 2005-2006 CSHCN survey. Annual performance objective falls within the 95% confidence interval of the current rate. In 2007, following the release of the most recent survey, discussions with program staff led to the target of 55.7% to be established through 2013.

Data come from survey and state numerator/denominator are not available

3. Section Number: Form11_Performance Measure #2**Field Name:** PM02**Row Name:****Column Name:****Year:** 2007**Field Note:**

Indicator data come from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM02 indicator for both the 2001 and the 2005-2006 CSHCN survey. Annual performance objective falls within the 95% confidence interval of the current rate.

PERFORMANCE MEASURE # 03

The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	53	53	53	48.6	48.7
Annual Indicator	53.6	53.6	48.3	48.3	48.3
Numerator					
Denominator					
Data Source				National Survey of CSHCN	National Survey of CSHCN
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	48.8	48.9	49	49.1	49.1
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2009**Field Note:**

Indicator data come from the National Survey of CSHCN, conducted every 5 years by HRSA and CDC. The most recent data are from the 2005-2006 survey. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions and additions to the questions used to generate the NPM03 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for NPM03. A new annual performance objective of 48.5% was developed in 2007 based on discussion with program staff. An annual increase of 0.1 was chosen, and has been extended through 2014.

Data come from survey and state numerator/denominator are not available

2. Section Number: Form11_Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2008**Field Note:**

Indicator data come from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions and additions to the questions used to generate the NPM03 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for NPM03. A new annual performance objective of 48.5% was developed in 2007 based on discussion with program staff. An annual increase of 0.1% was chosen, and has been extended through 2013.

3. Section Number: Form11_Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2007**Field Note:**

Indicator data come from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions and additions to the questions used to generate the NPM03 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for NPM03. A new annual performance objective of 48.5% was developed based on discussion with program staff. An annual increase of 0.1% was chosen through 2012.

PERFORMANCE MEASURE # 04

The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)

	Annual Objective and Performance Data				
	2005	2006	2007	2008	2009
Annual Performance Objective	<u>63</u>	<u>64.5</u>	<u>66</u>	<u>67.5</u>	<u>69</u>
Annual Indicator	<u>64.4</u>	<u>64.4</u>	<u>65.3</u>	<u>65.3</u>	<u>65.3</u>
Numerator	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>
Denominator	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>
Data Source				National Survey of CSHCN	National Survey of CSHCN
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. <i>(Explain data in a year note. See Guidance, Appendix IX.)</i>					
Is the Data Provisional or Final?				Final	Final

	Annual Objective and Performance Data				
	2010	2011	2012	2013	2014
Annual Performance Objective	<u>70.5</u>	<u>72</u>	<u>73.5</u>	<u>75</u>	<u>76.5</u>
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #4

Field Name: PM04

Row Name:

Column Name:

Year: 2009

Field Note:

Indicator data come from the National Survey of CSHCN, conducted every 5 years by HRSA and CDC. The most recent data are from the 2005-2006 survey. The most recent data are from the 2005-2006 survey. The same questions were used to generate the NPM04 indicator for both the 2001 and the 2005-2006 CSHCN survey. Based on discussion with program staff an annual increase of 1.5 was chosen starting in 2007 and extended through 2014.

2. **Section Number:** Form11_Performance Measure #4

Field Name: PM04

Row Name:

Column Name:

Year: 2008

Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM04 indicator for both the 2001 and the 2005-2006 CSHCN survey.

3. **Section Number:** Form11_Performance Measure #4

Field Name: PM04

Row Name:

Column Name:

Year: 2007

Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM04 indicator for both the 2001 and the 2005-2006 CSHCN survey.

PERFORMANCE MEASURE # 05

Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	74.6	75	76	85.5	85.6
Annual Indicator	74.1	74.1	85.4	85.4	85.4
Numerator					
Denominator					
Data Source				National Survey of CSHCN	National Survey of CSHCN
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	85.7	85.8	85.9	86	86.1
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #5**Field Name:** PM05**Row Name:****Column Name:****Year:** 2009**Field Note:**

Indicator data come from the National Survey of CSHCN, conducted every 5 years by HRSA and CDC. The most recent data are from the 2005-2006 survey. Compared to the 2001 CSHCN survey, there were revisions to the wording, ordering and the number of the questions used to generate the NPM05 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for NPM05. New annual performance objectives were established based on discussions with program staff. An annual increase of 0.1 was chosen through 2014.

2. Section Number: Form11_Performance Measure #5**Field Name:** PM05**Row Name:****Column Name:****Year:** 2008**Field Note:**

Indicator data come from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were revisions to the wording, ordering and the number of the questions used to generate the NPM05 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for NPM05. New annual performance objectives were established based on discussions with program staff. An annual increase of 0.1% was chosen through 2013.

3. Section Number: Form11_Performance Measure #5**Field Name:** PM05**Row Name:****Column Name:****Year:** 2007**Field Note:**

Indicator data come from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were revisions to the wording, ordering and the number of the questions used to generate the NPM05 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for NPM05. New annual performance objectives were established based on discussions with program staff. An annual increase of 0.1% was chosen through 2012.

PERFORMANCE MEASURE # 06

The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	8.3	9.8	11.3	47.4	47.5
Annual Indicator	5.8	5.8	47.3	47.3	47.3
Numerator					
Denominator					
Data Source				National Survey of CSHCN	National Survey of CSHCN
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	47.6	47.7	47.8	47.9	48
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #6**Field Name:** PM06**Row Name:****Column Name:****Year:** 2009**Field Note:**

Indicator data come from the National Survey of CSHCN, conducted every 5 years by HRSA and CDC. The most recent data are from the 2005-2006 survey. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate the NPM06 indicator for the 2005-2006 CSHCN survey. There were also issues around the reliability of the 2001 data because of the small sample size. The data for the two surveys are not comparable for NPM06 and the 2005-2006 survey may be considered baseline data. New annual performance objectives were established based on discussions with program staff. An annual increase of 0.1 starting in 2009 was chosen through 2014.

2. Section Number: Form11_Performance Measure #6**Field Name:** PM06**Row Name:****Column Name:****Year:** 2008**Field Note:**

Indicator data come from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate the NPM06 indicator for the 2005-2006 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the two surveys are not comparable for NPM06 and the 2005-2006 survey may be considered baseline data. New annual performance objectives were established based on discussions with program staff. An annual increase of 0.1% was chosen through 2013.

3. Section Number: Form11_Performance Measure #6**Field Name:** PM06**Row Name:****Column Name:****Year:** 2007**Field Note:**

Indicator data come from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate the NPM06 indicator for the 2005-2006 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the two surveys are not comparable for NPM06 and the 2005-2006 survey may be considered baseline data. New annual performance objectives were established based on discussions with program staff. An annual increase of 0.1% was chosen through 2012.

PERFORMANCE MEASURE # 07

Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	77	78	79	79	80
Annual Indicator	77.8	77.6	73.9	77.7	
Numerator	62,309	64,358	62,089	65,960	
Denominator	80,089	82,935	84,017	84,891	
Data Source				National Immunization Survey	
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	80	80	80	80	80
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #7**Field Name:** PM07**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data from 2009 NIS not yet available.

2. Section Number: Form11_Performance Measure #7**Field Name:** PM07**Row Name:****Column Name:****Year:** 2008**Field Note:**

PERFORMANCE OBJECTIVES: Discussion with Immunization staff led to the decision to set the annual performance objective equal to the Healthy People 2010 goal of 80 percent coverage for these antigens. The survey point estimate's 95% confidence interval of +/- 5.3% (72.4%, 83.0%) includes the program's goal of 80% coverage.

Indicator data came from the National Immunization Survey 2008, Centers for Disease Control and Prevention (CDC). This estimate is based on the provider-verified responses for children who live in households with telephones. Statistical methods are used to adjust for children whose parents refuse to participate, those who live in households without telephones, or those whose immunization histories cannot be verified through their providers. The numerator is the calculated number of children with completed immunizations. Denominator data came from the Washington State Office of Financial Management.

3. Section Number: Form11_Performance Measure #7**Field Name:** PM07**Row Name:****Column Name:****Year:** 2007**Field Note:**

PERFORMANCE OBJECTIVES: A combination of trend analyses and comparisons to other states were used to create the future objectives. A one percent increase every two years was chosen.

Numerator data came from the National Immunization Survey 2007, Centers for Disease Control and Prevention (CDC). This estimate is based on the provider-verified responses for children who live in households with telephones. Statistical methods are used to adjust for children whose parents refuse to participate, those who live in households without telephones, or those whose immunization histories cannot be verified through their providers. The numerator is the estimated number of children with completed immunizations. Denominator data came from the Washington State Office of Financial Management.

PERFORMANCE MEASURE # 08

The rate of birth (per 1,000) for teenagers aged 15 through 17 years.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	14	15.5	15.4	15.3	15.2
Annual Indicator	14.9	15.2	16.1	15.5	
Numerator	1,966	2,062	2,217	2,131	
Denominator	132,042	135,315	137,767	137,469	
Data Source				WA Center for Health Statistics	
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	15.1	15	14.9	14.8	14.7
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #8

Field Name: PM08

Row Name:

Column Name:

Year: 2009

Field Note:

Birth data from WA CHS for 2009 not yet available.

2. Section Number: Form11_Performance Measure #8

Field Name: PM08

Row Name:

Column Name:

Year: 2008

Field Note:

PERFORMANCE OBJECTIVES: A combination of trend analyses and comparisons to other states were used to create the future objectives. In 2005, discussions took place regarding the flattening of the rate at 14.0. The 75th percentile of states was at 15%, which was close to where Washington was; 15.2% at that point. A target of 15.5 % was chosen for 2006 with a 0.1 annual decrease targeted every year afterward. In 2010 further discussions with program staff resulted in the maintenance of the targeted change previously decided on.

3. Section Number: Form11_Performance Measure #8

Field Name: PM08

Row Name:

Column Name:

Year: 2007

Field Note:

PERFORMANCE OBJECTIVES: A combination of trend analyses and comparisons to other states were used to create the future objectives. In 2005, discussions took place regarding the flattening off of the rate at 14.0. The 75th percentile state was at 15%, which was close to where Washington was at with 15.2%. A target of 15.5 % was chosen for 2006 with a 0.1 annual decrease targeted every year afterward.

PERFORMANCE MEASURE # 09

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	55.5	55.5	50	50	50
Annual Indicator	50.4	50.4	50.4	50.4	
Numerator	41,460	41,460	42,971	42,725	
Denominator	82,261	82,261	85,260	84,771	
Data Source				Washington State 2005 Smile Survey	
Do not report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?	Final				

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	50	50	50	50	50
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data collection from the 2010 WA Smile Survey is in progress. Analysis will be taking place over the summer of 2010. A new Annual Indicator will then be available.

2. Section Number: Form11_Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2008**Field Note:**

PERFORMANCE OBJECTIVES: The Smile Survey is only conducted every 5 years, and therefore only two data points exist, preventing accurate trend analysis. The 75th percentile state was at 49.4%. The Healthy People 2010 goal of 50% was chosen as the future objective through 2014, since it is attainable and will be an improvement on the historical decrease of dental sealants.

The denominator is the number 8 year olds in WA and comes from the WA Office of Financial Management. The numerator is calculated from the rate and the denominator.

The Washington State Smile Survey is conducted by the Department of Health every five years. During the most recent survey in 2005, thirty-nine Head start or ECEAP sites and sixty-seven public elementary schools with a 2nd or 3rd grade were randomly selected across the state during the 2004-2005 school year. All preschool children enrolled and present on the day of the screening were included in the sample unless the parent returned a consent form specifically opting out of the sample. Elementary schools could choose to use either an active or passive consent process. Each child participating in the survey received an oral screening exam to determine the child's caries experience, treatment need and urgency, and dental sealants needs. The indicator of 50.4% is gathered from the 2005 SMILE Survey. Denominator data came from the Washington State Office of Financial Management. The numerator is derived from these data.

The Smile Survey will be conducted again this coming school year beginning in the Fall 2009 school term and finishing in the Spring 2010 term.

The Smile Survey was developed in Washington State has been adapted and implemented by several other states.

3. Section Number: Form11_Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2007**Field Note:**

PERFORMANCE OBJECTIVES: The Smile Survey is only conducted every 5 years, and therefore only two data points exist, preventing accurate trend analysis. The 75th percentile state was at 49.4%. The Healthy People 2010 goal of 50% was chosen as the future objective through 2013, since it is attainable and will be an improvement on the historical decrease of dental sealants.

The Washington State Smile Survey is conducted by the Department of Health every five years. During the most recent survey in 2005, thirty-nine Head start or ECEAP sites and sixty-seven public elementary schools with a 2nd or 3rd grade were randomly selected across the state during the 2004-2005 school year. All preschool children enrolled and present on the day of the screening were included in the sample unless the parent returned a consent form specifically opting out of the sample. Elementary schools could choose to use either an active or passive consent process. Each child participating in the survey received an oral screening exam to determine the child's caries experience, treatment need and urgency, and dental sealants needs. The indicator of 50.4% is gathered from the 2005 SMILE Survey. Denominator data came from the Washington State Office of Financial Management. The numerator is derived from these data.

The Smile Survey will be conducted again this coming school year beginning in the Fall 2009 school term and finishing in the Spring 2010 term.

The Smile Survey was developed in Washington State has been adapted and implemented by several other states.

PERFORMANCE MEASURE # 10

The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	2.5	2.5	2.4	2.4	2
Annual Indicator	3.1	1.7	2.0	1.1	
Numerator	39	21	26	14	
Denominator	1,259,643	1,270,785	1,281,739	1,295,245	
Data Source				WA Injury and Violence Program	
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	1.5	1.5	1.5	1.5	1.5
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #10**Field Name:** PM10**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data for 2009 are not available.

2. Section Number: Form11_Performance Measure #10**Field Name:** PM10**Row Name:****Column Name:****Year:** 2008**Field Note:**

PERFORMANCE OBJECTIVES: Although there have been some fluctuations, over the past 12 years, an overall decrease has been observed. Rates are prone to a great degree of variance due to small numerators. Many years of data were used to assess the trends, therefore future targets may not appear to align with the most recent indicators. After discussions with program and assessment staff we decided to revise the performance objective downward based on the data in the last four years. Given the persistent low rate it was decided to drop the target by .5 child per 100,000, to a goal of 1.5 per 100,000 through 2014.

The numerator is gathered from the Washington State Department of Health Injury and Violence Program. The denominator is from the Office of Financial Management Population Forecast. The data were accessed through the Community Health Assessment Tool (CHAT).

3. Section Number: Form11_Performance Measure #10**Field Name:** PM10**Row Name:****Column Name:****Year:** 2007**Field Note:**

PERFORMANCE OBJECTIVES: Although there have been some fluctuations, over the past 12 years, an overall decrease has been observed, possibly due to use of seat belts, child safety seats, and airbags. Rates are prone to a great degree of variance due to small numerators. Many years of data were used to assess the trends, therefore future targets may not appear to align with the most recent indicators. The 95% confidence interval of the rate in 2007 was (1.3, 3.0) which includes the performance objective (2.4), and we conclude the indicator and the objective are not statistically significantly different. After discussions with program and assessment staff we decided to revise the performance objective downward based on the data in the last four years. The objective of 2.3 per 100,000 had been chosen as a goal through 2013, however in all but one of the past four years that goal had been achieved and bettered, a new goal which reflects the present rate of 2.0 has been settled on for future objectives.

The numerator is gathered from the Washington State Department of Health Injury and Violence Program. The denominator is from the Office of Financial Management Population Forecast.

PERFORMANCE MEASURE # 11

The percent of mothers who breastfeed their infants at 6 months of age.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective		52	53	53	58
Annual Indicator	55.5	58.8	57.3	58.0	
Numerator	45,857	47,323	50,951	52,357	
Denominator	82,625	80,482	88,921	90,270	
Data Source				National Immunization Survey	
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	58.5	58.5	59	59	59.5
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #11**Field Name:** PM11**Row Name:****Column Name:****Year:** 2009**Field Note:**

National Immunization Data are not yet available

2. Section Number: Form11_Performance Measure #11**Field Name:** PM11**Row Name:****Column Name:****Year:** 2008**Field Note:**

This measure changed in 2006, from breastfeeding at hospital discharge to six months or more after delivery. The Indicator rate comes from the National Immunization Survey, and can be highly variable due to small sample size (2008 n=400). The 95% Confidence Interval for 2008 (51.4%, 64.6%) included the target goal of 53% set previously.

Owing to the increase in the percentage of women breastfeeding in recent years, it was decided to increase the annual performance objective by 0.5 every two years through 2014.

The indicator is from the 2008 National Immunization Survey and includes the birth cohort from 2006. The denominator is the number of livebirths to WA residents in 2008. The numerator is calculated from the indicator and the denominator.

3. Section Number: Form11_Performance Measure #11**Field Name:** PM11**Row Name:****Column Name:****Year:** 2007**Field Note:**

This measure changed in 2006, from breastfeeding at hospital discharge to six months or more after delivery. Rates are based on the National Immunization Survey, and are highly variable due to small sample size. The 95% confidence interval for 2007 was (50.8, 63.8) which includes the performance objective. After discussions with program and assessment staff we decided to revise the performance objective upward based on the data from the last two years.

The source of this data is the 2007 National Immunization Survey (NIS) which is reported for children born in 2005. As of July 2009 these data were reported as provisional by CDC. The numerator is based on the proportion of women who reported breastfeeding at six months or longer. The denominator was obtained from the live birth file, for Washington residents.

PERFORMANCE MEASURE # 12

Percentage of newborns who have been screened for hearing before hospital discharge.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	90	90	96.5	97	97.5
Annual Indicator	94.4	96.5	95.3	95.7	95.6
Numerator	76,241	77,792	80,067	81,303	79,963
Denominator	80,728	80,607	84,043	84,913	83,666
Data Source				WA EHDDI program	WA EHDDI program
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	97	97	97.5	97.5	98
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #12**Field Name:** PM12**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data reported by the Washington State Early Hearing-loss Detection, Diagnosis, and Intervention (EHDDI) program.

A consideration of present efforts and future plans for the program were used to set future targets. The national goal is to reach 95%, but since Washington State has already attained that, and 100% is not a realistic goal, a goal of 97% was set through 2011 with a 0.5 increase every two years, starting in 2012, following that.

Data exclude births which occur in military hospitals, and those parents who refused a hearing screen (1%). Homebirths attended by midwives who do not chose to conduct a screen are also missing and therefore not included. Some births to out of state residents may be included if they are reported by hospitals in Washington State.

2. Section Number: Form11_Performance Measure #12**Field Name:** PM12**Row Name:****Column Name:****Year:** 2008**Field Note:**

Data reported by the Washington State Early Hearing-loss Detection, Diagnosis, and Intervention (EHDDI) program.

A combination of trend analyses and comparisons to other states were used to create the future objectives. The national goal is to reach 95%, but since Washington State has already attained that, and 100% is not a realistic goal, a 0.5% increase per year was chosen.

Data exclude births which occur in military hospitals, and those parents who refused a hearing screen (1%). Homebirths attended by midwives who do not chose to conduct a screen are also missing and therefore not included. Some births to out of state residents may be included if they are reported by hospitals in Washington State.

3. Section Number: Form11_Performance Measure #12**Field Name:** PM12**Row Name:****Column Name:****Year:** 2007**Field Note:**

Data reported by the EHDDI program.

A combination of trend analyses and comparisons to other states were used to create the future objectives. The national goal is to reach 95%, but since Washington State has already attained that, and 100% is not a realistic goal, a 0.5% increase per year was chosen.

Data exclude births which occur in military hospitals, and those parents who refused a hearing screen (1%). Homebirths attended by midwives who do not chose to conduct a screen are also missing and therefore not included. Some births to out of state residents may be included if they are reported by hospitals in Washington State.

PERFORMANCE MEASURE # 13

Percent of children without health insurance.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	5	5	4	4	4
Annual Indicator	6.0	4.4	4.4	4.6	4.6
Numerator	97,158	72,158	72,979	76,954	77,211
Denominator	1,619,803	1,639,962	1,658,605	1,672,915	1,678,507
Data Source				2008 Washington State Population Survey	2008 Washington State Population Survey
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	3	3	3	3	3
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #13**Field Name:** PM13**Row Name:****Column Name:****Year:** 2009**Field Note:**

The source of the Indicator rate is the 2008 Washington State Population Survey, from the Washington State Office of Financial Management. The State Population Survey is a telephone-based survey that takes place every two years. Children include persons 0 through age 18. Insurance status was based on time of interview. Estimates are adjusted for missing income or insurance status data.

Recent reform in Federal Health Care policy will impact rates of coverage. Performance objectives are being left "as is" until the impact of the Federal reform at the state level becomes clearer.

2. Section Number: Form11_Performance Measure #13**Field Name:** PM13**Row Name:****Column Name:****Year:** 2008**Field Note:**

PERFORMANCE OBJECTIVES: Decreasing targets were chosen due to the new law going into effect July 2007, granting children health insurance. Phase 2 of this law goes into effect in late 2009.

The data source is the 2008 Washington State Population Survey, from the Washington State Office of Financial Management. The State Population Survey is a telephone-based survey that takes place every two years. Children include persons 0 through age 18. Insurance status was based on time of interview. Estimates are adjusted for missing income or insurance status data.

3. Section Number: Form11_Performance Measure #13**Field Name:** PM13**Row Name:****Column Name:****Year:** 2007**Field Note:**

No new data available for percent of uninsured kids. Rate same as reported last year.

PERFORMANCE MEASURE # 14

Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective		29	29	29	29
Annual Indicator	29.2	28.9	29.4	30.4	30.3
Numerator	24,679	25,518	26,081	29,029	32,120
Denominator	84,520	88,312	88,709	95,359	106,173
Data Source				WA State Women Infants and Children Program	WA State Women Infants and Children Program
Do not report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	30	30	30	30	30
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #14**Field Name:** PM14**Row Name:****Column Name:****Year:** 2009**Field Note:**

The source of these data are the Washington State Department of Health, Women, Infants, and Children (WIC) program. The numerator is the number of overweight (BMI > 85th percentile) children, ages 2 to 5 years, who receive WIC services during CY 2009. The denominator is number of children, ages 2 to 5 years, who receive WIC services during the reporting year

2. Section Number: Form11_Performance Measure #14**Field Name:** PM14**Row Name:****Column Name:****Year:** 2008**Field Note:**

PERFORMANCE OBJECTIVES: Trend analyses and discussions with WIC staff resulted in future targets of 29% through the year 2013. Maintaining current rates would be an improvement, showing that the rate of children becoming overweight is not increasing

The source of these data are the Washington State Department of Health, Women, Infants, and Children (WIC) program. The numerator is the number of overweight (BMI > 85th percentile) children, ages 2 to 5 years, who receive WIC services during CY 2007. The denominator is number of children, ages 2 to 5 years, who receive WIC services during the reporting year.

3. Section Number: Form11_Performance Measure #14**Field Name:** PM14**Row Name:****Column Name:****Year:** 2007**Field Note:**

PERFORMANCE OBJECTIVES: Trend analyses and discussions with WIC staff resulted in future targets of 29% through the year 2012. Maintaining current rates would be an improvement, showing that the rate of children becoming overweight is not increasing.

The source of this data is the Washington State Department of Health, Women, Infants, and Children (WIC) program. The numerator is the number of overweight (BMI > 85th percentile) children, ages 2 to 5 years, who receive WIC services during CY 2007. The denominator is number of children, ages 2 to 5 years, who receive WIC services during the reporting year.

PERFORMANCE MEASURE # 15

Percentage of women who smoke in the last three months of pregnancy.

<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008
Annual Performance Objective		10	9.1	9.1
Annual Indicator	9.2	9.2	9.4	11.2
Numerator	7,602	7,990	8,359	10,110
Denominator	82,625	86,845	88,921	90,270
Data Source				Pregnancy Risk Assessment Monitoring System (PRAMS)
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)				
Is the Data Provisional or Final?				Final

<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013
Annual Performance Objective	9	8.9	8.9	8.8
Annual Indicator				
Numerator				
Denominator				

Field Level Notes**1. Section Number:** Form11_Performance Measure #15**Field Name:** PM15**Row Name:****Column Name:****Year:** 2009**Field Note:**

PRAMS data for 2009 are not yet available.

2. Section Number: Form11_Performance Measure #15**Field Name:** PM15**Row Name:****Column Name:****Year:** 2008**Field Note:**

Washington State is in the forefront of states in this measure. Recent budget cuts in tobacco prevention may be counterbalanced by increased taxes on cigarettes, so anticipating change and its direction, at this point is difficult. Decision made to leave previous targets in place.

The indicator is the percent of women who reported smoking in the third trimester of pregnancy in the Pregnancy Risk Assessment Monitoring System (PRAMS) in 2008. The denominator is the number of WA resident births in 2008. The numerator is calculated from the denominator and the indicator.

3. Section Number: Form11_Performance Measure #15**Field Name:** PM15**Row Name:****Column Name:****Year:** 2007**Field Note:**

PERFORMANCE OBJECTIVES: Washington State is in the forefront of states in this measure. Looking at trending in the data, a 0.1% decrease every other year was chosen.

This indicator is based on the proportion of women reporting smoking in the last three months of pregnancy and is from the Pregnancy Risk Assessment Monitoring System (PRAMS), 2008. The denominator are the number of women delivering babies during the year and are from the Washington State Department of Health Center for Health Statistics. The numerator is derived from these data.

PERFORMANCE MEASURE # 16

The rate (per 100,000) of suicide deaths among youths aged 15 through 19.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	8.9	8.9	8.8	8.7	7.9
Annual Indicator	9.1	8.5	8.0	7.6	
Numerator	41	39	40	36	
Denominator	450,402	459,182	497,786	472,122	
Data Source				WA Center for Health Statistics	
Do not report the numerator because there are fewer than 5 events over the last year, and the average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	7.8	7.7	7.6	7.5	7.4
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #16**Field Name:** PM16**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data not yet available.

2. Section Number: Form11_Performance Measure #16**Field Name:** PM16**Row Name:****Column Name:****Year:** 2008**Field Note:**

The numerator for this rate is defined as the number deaths with ICD 10 Codes X60-X84 and Y87.0 and U03 for youth ages 15-19. The denominator is the estimated population for ages 15-19. The rate is per 100,000 population. The source for the data is the Washington Center for Health Statistics Death Certificate files (updated annually between September and October). Data were accessed via the Community Health Assessment Tool (CHAT).

The 2008 95% confidence interval (7.6, 10.6) includes the performance objective.

3. Section Number: Form11_Performance Measure #16**Field Name:** PM16**Row Name:****Column Name:****Year:** 2007**Field Note:**

PERFORMANCE OBJECTIVES: Trend analyses and interdepartmental discussions took place to choose future objectives. Rates are subject to considerable variance and trends are based on many years of data, so future targets may not appear to align with the most recent results. The 2007 95% confidence interval (5.7, 10.9) includes the performance objective. After discussions with program and assessment staff we decided to revise the performance objective downward based on the data from the last four years. Because of the small numbers, the rates are highly variable. A conservative annual decrease of 0.1 in the rate/year was chosen.

The numerator for this rate is defined as the number deaths with ICD 10 Codes X60-X84 and Y87.0 and U03 for youth ages 15-19. The denominator is the estimated population for ages 15-19. The rate is per 100,000 population. The source for the data is the Washington Center for Health Statistics Death Certificate files (updated annually between September and October) and the Office of Financial Management, Intercensal and Postcensal Estimates of County Population by Age and Sex.

PERFORMANCE MEASURE # 17

Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	85	86	87	86.1	86.2
Annual Indicator	87.8	85.9	85.8	82.6	
Numerator	604	709	774	754	
Denominator	688	825	902	913	
Data Source				WA Center for Health Statistics	
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	86.2	86.3	86.3	86.4	86.4
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #17**Field Name:** PM17**Row Name:****Column Name:****Year:** 2009**Field Note:**

Birth data for 2009 not yet available.

2. Section Number: Form11_Performance Measure #17**Field Name:** PM17**Row Name:****Column Name:****Year:** 2008**Field Note:**

PERFORMANCE OBJECTIVES: A combination of trend analyses and discussions were used to create the future objectives. The number of tertiary care hospitals has increased over time leading to improvements in this indicator, but is not expected to increase further. Therefore, an increase of 0.1 every two years was chosen.

The numerator is determined by the number of resident very low birth weight (VLBW) births that occur in-state delivered at a hospital providing perinatal intensive care (Level III). The denominator represents the total number of VLBW resident infants born in-state. The source for this data is the Washington Center for Health Statistics Birth Certificate Files.

3. Section Number: Form11_Performance Measure #17**Field Name:** PM17**Row Name:****Column Name:****Year:** 2007**Field Note:**

PERFORMANCE OBJECTIVES: A combination of trend analyses and discussions were used to create the future objectives. The number of tertiary care hospitals has increased over time leading to improvements in this indicator, but is not expected to increase further. Therefore, an increase of 0.1 percent every two years was chosen.

The numerator is determined by the number of resident very low birth weight (VLBW) births that occur in-state delivered at a hospital providing perinatal intensive care (Level III). The denominator represents the total number of VLBW resident infants born in-state. The source for this data is the Washington Center for Health Statistics Birth Certificate Files.

PERFORMANCE MEASURE # 18

Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	83	80	81	81	77
Annual Indicator	79.2	78.5	76.3	77.0	
Numerator	54,648	59,518	61,938	64,561	
Denominator	69,038	75,853	81,187	83,870	
Data Source				WA Center for Health Statistics	
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	77	77	77	77	77
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #18**Field Name:** PM18**Row Name:****Column Name:****Year:** 2009**Field Note:**

2009 Birth Certificate data for WA resident births are not yet available.

2. Section Number: Form11_Performance Measure #18**Field Name:** PM18**Row Name:****Column Name:****Year:** 2008**Field Note:**

PERFORMANCE OBJECTIVES: A new birth certificate was implemented in 2003. The specificity of the question, which asks for the exact date of prenatal care initiation, has resulted in a high amount of missing data. In 2008, 7.1% of the data was missing for this measure. This is, however, an improvement over past year's percentages

Trend analyses based on data from 2003-2008 indicate a continued decrease in this measure. Additionally, there is a large disparity by Medicaid status. 66.6% of women receiving Medicaid received care beginning in the first trimester compared to 87.0% of women not receiving Medicaid (source First Steps Data Base, Washington State Department of Social and Health Services). The apparent and sustained decrease in the measure has led program staff to believe that decreasing the target to reflect recent data and holding this rate steady is the optimal outcome which can be achieved in the short term given recent cuts to the First Steps program and a lack of availability of providers to take on additional Medicaid patients in some regions of the state.

Further, the National Center for Health Statistics (NCHS) indicates that, "the 2003 revision of the birth certificate introduced substantive changes in item wording and also to the sources of prenatal information....Accordingly, prenatal care data for the two revisions are not comparable." As a result, trend analysis crossing from 2002-2003 cannot be done. Trends can only be based on six years' worth of data (2003-2008).

The source for these data is the Washington Center for Health Statistics Birth Certificate Files (updated annually between September and October). The numerator is the number of resident live births with a reported first prenatal visit before 13 weeks gestation. The denominator is the total number of resident live births. Missing data are excluded.

3. Section Number: Form11_Performance Measure #18**Field Name:** PM18**Row Name:****Column Name:****Year:** 2007**Field Note:**

PERFORMANCE OBJECTIVES: A new birth certificate was implemented in 2003. The specificity of the question, which asks for the exact date of prenatal care initiation, has resulted in a high amount of missing data. In 2007, 8.7% of the data was missing for this measure. This is, however, an improvement over past year's percentages

Trend analyses based on data from 2003-2007 indicate a continued decrease in this measure. Additionally, there is a large disparity by Medicaid status. 65.3% of women receiving Medicaid received care beginning in the first trimester compared to 86.6% of women not receiving Medicaid (source First Steps Data Base, Washington State Department of Social and Health Services). The apparent and sustained decrease in the measure has led program staff to believe that decreasing the target to reflect recent data and holding this rate steady is the optimal outcome which can be achieved in the short term given recent cuts to the First Steps program and a lack of availability of providers to take on additional Medicaid patients in some regions of the state. It is hoped that future economic conditions will facilitate a return to a positive trend in this measure and this is indicated in an increase of 1% and its maintenance in the 2012-2013 period.

Further, the National Center for Health Statistics (NCHS) indicates that, "the 2003 revision of the birth certificate introduced substantive changes in item wording and also to the sources of prenatal information....Accordingly, prenatal care data for the two revisions are not comparable." As a result, trend analysis crossing from 2002-2003 cannot be done. Trends can only be based on five years' worth of data (2003-2007).

The source for these data is the Washington Center for Health Statistics Birth Certificate Files (updated annually between September and October). The numerator is the number of resident live births with a reported first prenatal visit before 13 weeks gestation. The denominator is the total number of resident live births. Missing data are

excluded.

FORM 11
TRACKING PERFORMANCE MEASURES
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]
STATE: WA

Form Level Notes for Form 11

None

STATE PERFORMANCE MEASURE # 1 - REPORTING YEAR

The percent of pregnancies (live births, fetal deaths, abortions) that are unintended.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective		52	52	52	51
Annual Indicator	51.7	51.0	50.0	50.4	
Numerator	55,011	56,923	56,835	57,679	
Denominator	106,427	111,635	113,656	114,549	
Data Source				Multiple Sources See field notes	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	51	51	51	51	
Annual Indicator					
Numerator					
Denominator					

Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.

Field Level Notes

1. Section Number: Form11_State Performance Measure #1

Field Name: SM1

Row Name:

Column Name:

Year: 2009

Field Note:

Data are not yet available. This measure will be brought forward into the next five year Block Grant cycle.

2. Section Number: Form11_State Performance Measure #1

Field Name: SM1

Row Name:

Column Name:

Year: 2008

Field Note:

The numerator for this measure is derived from the estimated percentage of unintended pregnancies from Washington State Pregnancy Risk Assessment Monitoring System (PRAMS) survey *(resident live births + reported resident abortions). The denominator for this measure is the number of resident live births + reported resident abortions. Birth and abortion data are obtained from the Washington State Center for Health Care Statistics Birth, Fetal Death, and Abortion files for 2008. PRAMS 2008 data are used.

Given three years of a slight, but steady downward trend it was decided to lower the annual performance objective by one percent through 2014.

3. Section Number: Form11_State Performance Measure #1

Field Name: SM1

Row Name:

Column Name:

Year: 2007

Field Note:

The numerator for this measure is derived from the estimated percentage of unintended pregnancies from Washington State Pregnancy Risk Assessment Monitoring System (PRAMS) survey *(resident live births + reported resident abortions). The denominator for this measure is the number of resident live births + reported resident abortions. Birth and abortion data are obtained from the Washington State Center for Health Care Statistics Birth, Fetal Death, and Abortion files for 2007. PRAMS 2007 data are used.

Given three years of a slight, but steady downward trend it was decided to lower the annual performance objective by one percent through 2013.

STATE PERFORMANCE MEASURE # 5 - REPORTING YEAR

Promote the use of Bright Futures materials and principles by health, social service, and education providers in Washington State.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective		70	85	95	100
Annual Indicator	40	65	80	90	90
Numerator					
Denominator					
Data Source				WA State Child and Adolescent Health Section	WA State Child and Adolescent Health Section
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	100	100	100	100	
Annual Indicator					
Numerator					
Denominator					

Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.

Field Level Notes**1. Section Number:** Form11_State Performance Measure #5**Field Name:** SM5**Row Name:****Column Name:****Year:** 2009**Field Note:**

PERFORMANCE OBJECTIVES: This new performance measure for the period of 2005-2009, is a process measure which differs from the other measures, which are outcome-oriented. The work being accomplished is groundbreaking and harder to quantify. Therefore, it will be assessed through benchmarks (statements describing the work that has been conducted each year). Since there are 20 benchmarks for the five year period, each benchmark is equivalent to five percentage points; at the end of the five years, 100% of the benchmarks seek to be attained. Each benchmark relates to the use of Bright Futures materials and principles by providers in Washington State.

No new benchmarks were attained in the past year.

2. Section Number: Form11_State Performance Measure #5**Field Name:** SM5**Row Name:****Column Name:****Year:** 2008**Field Note:**

PERFORMANCE OBJECTIVES: This new performance measure for the period of 2005-2009, is a process measure which differs from the other measures, which are outcome-oriented. The work being accomplished is groundbreaking and harder to quantify. Therefore, it will be assessed through benchmarks (statements describing the work that has been conducted each year). Since there are 20 benchmarks for the five year period, each benchmark is equivalent to five percentage points; at the end of the five years, 100% of the benchmarks seek to be attained. Each benchmark relates to the use of Bright Futures materials and principles by providers in Washington State.

The following new benchmarks have been attained:

Year 4

-Develop plan for ongoing professional oral health trainings, based on the evaluation.

-Assess Bright Futures activities to date and revise the plan in order to continue health promotion activities for the MCH population.

These data are provided by the Office of Maternal and Child Health, Child and Adolescent Health Section of the Washington State Department of Health, Division of Community and Family Health.

3. Section Number: Form11_State Performance Measure #5**Field Name:** SM5**Row Name:****Column Name:****Year:** 2007**Field Note:**

PERFORMANCE OBJECTIVES: This new performance measure for the period of 2005-2009, is a process measure which differs from the other measures, which are outcome-oriented. The work being accomplished is groundbreaking and harder to quantify. Therefore, it will be assessed through benchmarks (statements describing the work that has been conducted each year). Since there are 20 benchmarks for the five year period, each benchmark is equivalent to five percentage points; at the end of the five years, 100% of the benchmarks seek to be attained. Each benchmark relates to the use of Bright Futures materials and principles by providers in Washington State. The following new benchmarks have been attained:

Year 3

-Conduct trainings or develop curricula/materials according to needs identified in assessment.

-Evaluate Bright Futures oral health trainings.

-Disseminate findings from Foster Parent Mental Health project

STATE PERFORMANCE MEASURE # 6 - REPORTING YEAR

Percent of children 6-8 years old with dental caries experience in primary and permanent teeth.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective		52.2	58	57	56
Annual Indicator	59.0	59.0	59.0	59.0	59.0
Numerator	145,873	147,801	147,801	151,331	151,331
Denominator	247,243	250,511	250,511	256,493	256,493
Data Source				Washington State 2005 Smile Survey	Washington State 2005 Smile Survey
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	55	54	53	52	
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_State Performance Measure #6**Field Name:** SM6**Row Name:****Column Name:****Year:** 2009**Field Note:**

PERFORMANCE OBJECTIVES: There are only two years of data available since the Smile Survey is administered every five years. As more data become available, additional analyses will be conducted to determine appropriate future objectives. A gradual decrease of 1% per year through 2014 was chosen.

The source of the data is the 2005 Washington State SMILE Survey, therefore there are no new data for the indicator for 2009. The indicator reflects the proportion of 6-8 year olds with dental caries experience in primary and permanent teeth. The source of the denominator data is the Office of Financial Management Population Forecast. The numerator is calculated from both of these.

2. Section Number: Form11_State Performance Measure #6**Field Name:** SM6**Row Name:****Column Name:****Year:** 2008**Field Note:**

PERFORMANCE OBJECTIVES: There are only two years of data available since the Smile Survey is administered every five years. As more data become available, additional analyses will be conducted to determine appropriate future objectives. A gradual decrease of 1% per year through 2013 was chosen.

The source of the data is the 2005 Washington State SMILE Survey, therefore there are no new data for the indicator for 2008. The indicator reflects the proportion of 6-8 year olds with dental caries experience in primary and permanent teeth. The source of the denominator data is the Office of Financial Management Population Forecast. The numerator is calculated from both of these.

3. Section Number: Form11_State Performance Measure #6**Field Name:** SM6**Row Name:****Column Name:****Year:** 2007**Field Note:**

PERFORMANCE OBJECTIVES: There are only two years of data available since the Smile Survey is administered every five years. As more data become available, additional analyses will be conducted to determine appropriate future objectives. A gradual decrease of 1% per year through 2012 was chosen.

The source of the data is the 2005 Washington State SMILE Survey, therefore there are no new data for 2007. The indicator reflects the proportion of 6-8 year olds with dental caries experience in primary and permanent teeth. The source of the denominator data is the Office of Financial Management Population Forecast. The numerator is calculated from both of these.

STATE PERFORMANCE MEASURE # 7 - REPORTING YEAR

Strengthen statewide system capacity to promote health, safety, and school readiness of children birth to kindergarten entry.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective		54	82.8	97.2	100
Annual Indicator	25.2	48.6	86.4	100	100
Numerator					
Denominator					
Data Source				WA State Child and Adolescent Health Section	WA State Child and Adolescent Health Section
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	100	100	100	100	
Annual Indicator					
Numerator					
Denominator					

Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.

Field Level Notes**1. Section Number:** Form11_State Performance Measure #7**Field Name:** SM7**Row Name:****Column Name:****Year:** 2009**Field Note:**

This is a process measure composed of 28 benchmarks. All 28 benchmarks have already been achieved.

2. Section Number: Form11_State Performance Measure #7**Field Name:** SM7**Row Name:****Column Name:****Year:** 2008**Field Note:**

This is a process measure (work being accomplished is groundbreaking & harder to quantify), w/ 28 benchmarks (statements describing annual work), weighted ~3.6% each with the goal of 100% attainment by 2010.

In 2008 all 28 benchmarks were attained, including the following new benchmarks:

- Maintain collaborations/partnerships with public and private sectors addressing health, safety and school readiness of children 0-5.
- Disseminate findings from Kids Matter implementation grant.
- Achieve full compliance of statewide users reporting in Healthy Child Care Washington (HCCW) data collection system.
- Develop and implement a plan to reduce barriers/promote strengths in HCCW network to support nurturing relationships and healthy environments in child care.

These data are provided by the Office of Maternal and Child Health, Child and Adolescent Health Section of the Washington State Department of Health, Division of Community and Family Health.

3. Section Number: Form11_State Performance Measure #7**Field Name:** SM7**Row Name:****Column Name:****Year:** 2007**Field Note:**

This is a process measure. The work being accomplished is groundbreaking and harder to quantify. Therefore, it will be assessed through benchmarks (statements describing the work that has been conducted each year). There are 28 benchmarks, weighted ~3.6% each with the goal of 100% attainment by 2010.

The following new benchmarks have been attained:

- Provide technical assistance and training to Child Care Health Consultants regarding Kids Matter and implementation activities.
- Identify existing OMCH data that can inform Kids Matter indicators and outcomes.
- Identify system level indicators for components of Kids Matter.
- Communicate health and safety in school readiness efforts based on Kids Matter system level outcomes across OMCH.
- Link Kids Matter indicators and outcomes to OMCH 9 priorities.
- Provide technical assistance and training to users of web-based data collection system for Healthy Child Care Washington (HCCW).
- Identify key HCCW policy messages and dissemination strategies.
- Create and disseminate annual report for Healthy HCCW.

STATE PERFORMANCE MEASURE # 8 - REPORTING YEAR

Use an established framework for ensuring quality screening, identification, intervention, and care coordination for women, infants, children, adolescents, and their families.

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective					100
Annual Indicator				100	100
Numerator					
Denominator					
Data Source				WA State Office of Maternal and Child Health	WA State Office of Maternal and Child Health
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	100	100	100	100	
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_State Performance Measure #8**Field Name:** SM8**Row Name:****Column Name:****Year:** 2009**Field Note:**

All quality improvement measures in the OMCH used the established framework.

These data are provided by the Office of Maternal and Child Health of the Washington State Department of Health, Community and Family Health Division.

2. Section Number: Form11_State Performance Measure #8**Field Name:** SM8**Row Name:****Column Name:****Year:** 2008**Field Note:**

All quality improvement measures in the OMCH used the established framework.

These data are provided by the Office of Maternal and Child Health of the Washington State Department of Health, Community and Family Health Division.

3. Section Number: Form11_State Performance Measure #8**Field Name:** SM8**Row Name:****Column Name:****Year:** 2007**Field Note:**

No data available as this is a new State Performance Measure.

STATE PERFORMANCE MEASURE # 9 - REPORTING YEAR

Develop an outcome measure for the Washington State maternal and child health priority of Optimal Mental Health and Healthy Relationships.

	Annual Objective and Performance Data				
	2005	2006	2007	2008	2009
Annual Performance Objective					60
Annual Indicator				39.9	78.5
Numerator					
Denominator					
Data Source				Washington State Office of Maternal and Child Heal	Washington State Office of Maternal and Child Heal
Is the Data Provisional or Final?				Final	Final

	Annual Objective and Performance Data				
	2010	2011	2012	2013	2014
Annual Performance Objective	100	100	100	100	
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_State Performance Measure #9**Field Name:** SM9**Row Name:****Column Name:****Year:** 2009**Field Note:**

This is a process measure created with the goal of developing an outcome measure. There are 8 benchmarks describing tasks, each variably weighted according to their importance. SPM09 is anticipated to be complete in 2010

Benchmarks with degree of completion:

Complete literature review to identify best practices for achieving specific desirable outcomes. 100% complete

-Identify existing mental health/healthy relationship activities (initiatives) being done in OMCH and identify any new activities that would be appropriate to add. 100% complete

-Determine if OMCH wants to adopt a specific theoretical model for promoting behavior change and use the model to help identify desired outcomes of the identified activities. 100% complete

-Determine short, intermediate, and long term outcomes for each activity. 90% complete

-Identify ways to measure the selected outcome, and if needed, develop the means to collect needed data or information 100% complete.

-Identify the short, intermediate, and long term outcomes for which OMCH has direct or primary influence. 0% complete.

-Develop an evaluation process for mental health and healthy relationship initiatives. 0% complete.

These data are provided by the Office of Maternal and Child Health of the Washington State Department of Health, Community and Family Health Division.

2. Section Number: Form11_State Performance Measure #9**Field Name:** SM9**Row Name:****Column Name:****Year:** 2008**Field Note:**

This is a process measure created with the goal of developing an outcome measure. There are 8 benchmarks describing tasks, each variably weighted according to their importance. SPM09 is anticipated to be complete in 2010

Benchmarks with degree of completion:

-Complete literature review to identify best practices for achieving specific desirable outcomes. 100% complete

-Identify existing mental health/healthy relationship activities (initiatives) being done in OMCH and identify any new activities that would be appropriate to add. 100% complete

-Determine if OMCH wants to adopt a specific theoretical model for promoting behavior change and use the model to help identify desired outcomes of the identified activities. 50% complete

-Determine short, intermediate, and long term outcomes for each activity. 66% complete

These data are provided by the Office of Maternal and Child Health of the Washington State Department of Health, Community and Family Health Division.

3. Section Number: Form11_State Performance Measure #9**Field Name:** SM9**Row Name:****Column Name:****Year:** 2007**Field Note:**

No data are available. This is a new State Performance Measure.

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STATE PERFORMANCE MEASURE # 10 - REPORTING YEAR

Identify health disparities, develop and implement interventions to address disparities, and evaluate the effectiveness of interventions in achieving health equity.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	_____	_____	_____	_____	3
Annual Indicator	_____	_____	_____	2.5	2.8
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Data Source				WA State Office of Maternal and Child Health	WA State Office of Maternal and Child Health
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	3	3	3	3	_____
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_State Performance Measure #10**Field Name:** SM10**Row Name:****Column Name:****Year:** 2009**Field Note:**

This measure is the average score given by the various participating sections in the Office of Maternal and Child Health of the Washington State Department of Health, Community and Family Health Division. Each section self-evaluated and reported the following scores.

Scale is 1- 3; 3 is the highest score possible.

Genetics 3
 CSHCN 3
 MICAH 3
 IPCP 3
 Oral Health 2

overall score = 2.8

2. Section Number: Form11_State Performance Measure #10**Field Name:** SM10**Row Name:****Column Name:****Year:** 2008**Field Note:**

This measure is the average score given by the various participating sections in the Office of Maternal and Child Health of the Washington State Department of Health, Community and Family Health Division. Each section self-evaluated and reported the following scores.

Scale is 1- 3; 3 is the highest score possible.

Genetics – 3
 CSHCN – 3
 CAH – 2
 IPCP – 3
 Oral Health – 2
 MIH – 2

OMCH average score – 2.5

These data are provided by the Office of Maternal and Child Health of the Washington State Department of Health, Community and Family Health Division.

3. Section Number: Form11_State Performance Measure #10**Field Name:** SM10**Row Name:****Column Name:****Year:** 2007**Field Note:**

No data are available. This is a new State Performance Measure.

FORM 12
TRACKING HEALTH OUTCOME MEASURES
[SECS 505 (A)(2)(B)(iii) AND 506 (A)(2)(A)(iii)]
STATE: WA

Form Level Notes for Form 12

None

OUTCOME MEASURE # 01

The infant mortality rate per 1,000 live births.

Annual Objective and Performance Data

	2005	2006	2007	2008	2009
Annual Performance Objective	5.5	5.5	5.3	5	5
Annual Indicator	5.1	4.7	4.8	5.4	5.4
Numerator	420	406	427	491	
Denominator	82,625	86,845	88,921	90,270	
Data Source				WA Center for Health Statistics	WA Center for Health Statistics

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2010	2011	2012	2013	2014
Annual Performance Objective	4.9	4.8	4.8	4.7	4.7
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

1. Section Number: Form12_Outcome Measure 1

Field Name: OM01

Row Name:

Column Name:

Year: 2009

Field Note:

Infant mortality data for 2009 not available yet.

The number entered as the "annual indicator" was the 2008 rate and does not necessarily represent the true rate for 2009.

2. Section Number: Form12_Outcome Measure 1

Field Name: OM01

Row Name:

Column Name:

Year: 2008

Field Note:

PERFORMANCE OBJECTIVES: A combination of trend analyses and comparisons to other states was used to create the future objectives.

Infant mortality rate is defined as the (number of deaths to children less than one-year old divided by the total number of live births) multiplied by 1000. The source for these data is Washington Center for Health Statistics, Linked Birth and Death Certificate files.

3. Section Number: Form12_Outcome Measure 1

Field Name: OM01

Row Name:

Column Name:

Year: 2007

Field Note:

PERFORMANCE OBJECTIVES: A combination of trend analyses and comparisons to other states was used to create the future objectives.

Infant mortality rate is defined as the (number of deaths to children less than one-year old divided by the total number of live births) multiplied by 1000. The source for these data is Washington Center for Health Statistics, Linked Birth and Death Certificate files.

OUTCOME MEASURE # 02

The ratio of the black infant mortality rate to the white infant mortality rate.

Annual Objective and Performance Data

	2005	2006	2007	2008	2009
Annual Performance Objective	1.6	1.6	1.9	1.6	1.6
Annual Indicator	2.0	1.6	2.1	1.8	1.8
Numerator	9.3	6.5	8.8	8.7	
Denominator	4.7	4	4.2	4.9	

Data Source

WA Center for
Health Statistics

WA Center for
Health Statistics

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer
 than 5 and therefore a 3-year moving average cannot be
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2010	2011	2012	2013	2014
Annual Performance Objective	1.5	1.5	1.5	1.5	1.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

1. **Section Number:** Form12_Outcome Measure 2

Field Name: OM02

Row Name:

Column Name:

Year: 2009

Field Note:

Infant mortality data for 2009 not yet available.

The annual indicator reported for this year is the same one reported for 2008 and does not necessarily represent the true rate.

2. **Section Number:** Form12_Outcome Measure 2

Field Name: OM02

Row Name:

Column Name:

Year: 2008

Field Note:

In 2003 a new birth certificate form was implemented. It collects some information differently, and caution should be used in interpreting year to year changes from 2002 to 2003.

The ratio is represented by the mortality rate for black infants/mortality rate for white infants by the definition given in (1). The source for these data is the Washington Center for Health Statistics, Linked Birth and Death Certificate files. The race of the mother is used.

3. **Section Number:** Form12_Outcome Measure 2

Field Name: OM02

Row Name:

Column Name:

Year: 2007

Field Note:

In 2003 a new birth certificate form was implemented. It collects some information differently, and caution should be used in interpreting year to year changes from 2002 to 2003.

The ratio is represented by the mortality rate for black infants/mortality rate for white infants by the definition given in (1). The source for these data is the Washington Center for Health Statistics, Linked Birth and Death Certificate files. The race of the mother is used.

OUTCOME MEASURE # 03

The neonatal mortality rate per 1,000 live births.

Annual Objective and Performance Data

	2005	2006	2007	2008	2009
Annual Performance Objective	3.6	3.6	3.4	3.4	3.3
Annual Indicator	3.0	3.0	2.8	3.3	3.3
Numerator	252	260	253	301	
Denominator	82,625	86,845	88,921	90,270	

Data Source

WA Center for
Health Statistics

WA Center for
Health Statistics

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer
 than 5 and therefore a 3-year moving average cannot be
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2010	2011	2012	2013	2014
Annual Performance Objective	3.2	3.1	3	2.9	2.8
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes**1. Section Number:** Form12_Outcome Measure 3

Field Name: OM03

Row Name:

Column Name:

Year: 2009

Field Note:

Neonatal mortality data for 2009 not yet available.

The annual indicator reported for this year is the same one reported for 2008 and does not necessarily represent the true rate.

2. Section Number: Form12_Outcome Measure 3

Field Name: OM03

Row Name:

Column Name:

Year: 2008

Field Note:

No data are available.

3. Section Number: Form12_Outcome Measure 3

Field Name: OM03

Row Name:

Column Name:

Year: 2007

Field Note:

PERFORMANCE OBJECTIVES: While rates are highly variable, trend analyses based on the past eight years resulted in future objectives with a the rate set at 3.3 through the year 2014.

The rate is determined by (the number of resident infant deaths occurring within the first 27 days of life divided by the total number resident live births) multiplied by 1000. The source for these data is the Washington Center for Health Statistics, Linked Birth and Death Certificate files.

OUTCOME MEASURE # 04

The postneonatal mortality rate per 1,000 live births.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	<u>1.9</u>	<u>1.9</u>	<u>1.9</u>	<u>1.9</u>	<u>1.9</u>
Annual Indicator	<u>2.0</u>	<u>1.9</u>	<u>2.0</u>	<u>2.1</u>	<u>2.1</u>
Numerator	<u>168</u>	<u>165</u>	<u>174</u>	<u>190</u>	
Denominator	<u>82,625</u>	<u>86,845</u>	<u>88,921</u>	<u>90,270</u>	
Data Source				WA Center for Health Statistics	WA Center for Health Statistics
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	<u>1.8</u>	<u>1.8</u>	<u>1.8</u>	<u>1.8</u>	<u>1.8</u>
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes**1. Section Number:** Form12_Outcome Measure 4**Field Name:** OM04**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data for 2009 postneonatal mortality are not yet available.

The annual indicator reported for this year is the same one reported for 2008 and does not necessarily represent the true rate.

2. Section Number: Form12_Outcome Measure 4**Field Name:** OM04**Row Name:****Column Name:****Year:** 2008**Field Note:**

PERFORMANCE OBJECTIVES: While rates are highly variable, trend analyses based on the past seven years have resulted in a future objective of 1.8 through 2014.

This rate is determined by (The number of deaths occurring to resident infants 28-364 days of age divided by the total number of resident live births) multiplied by 1000. The source for these data is the Washington Center for Health Statistics, Linked Birth and Death Certificate files.

3. Section Number: Form12_Outcome Measure 4**Field Name:** OM04**Row Name:****Column Name:****Year:** 2007**Field Note:**

PERFORMANCE OBJECTIVES: While rates are highly variable, trend analyses based on the past seven years have resulted in a future objective of 1.8 through 2013.

This rate is determined by (The number of deaths occurring to resident infants 28-364 days of age divided by the total number of resident live births) multiplied by 1000. The source for these data is the Washington Center for Health Statistics, Linked Birth and Death Certificate files.

OUTCOME MEASURE # 05

The perinatal mortality rate per 1,000 live births plus fetal deaths.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	<u>8.4</u>	<u>8.3</u>	<u>8.3</u>	<u>8.3</u>	<u>8.3</u>
Annual Indicator	<u>8.5</u>	<u>8.1</u>	<u>7.8</u>	<u>8.6</u>	<u>8.6</u>
Numerator	<u>703</u>	<u>706</u>	<u>692</u>	<u>776</u>	
Denominator	<u>82,625</u>	<u>86,845</u>	<u>88,921</u>	<u>90,270</u>	
Data Source				WA Center for Health Statistics	WA Center for Health Statistics
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	<u>8.3</u>	<u>8.2</u>	<u>8.2</u>	<u>8.2</u>	<u>8.2</u>
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes**1. Section Number:** Form12_Outcome Measure 5**Field Name:** OM05**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data for 2009 on perinatal mortality not available yet.

The annual indicator reported for this year is the same one reported for 2008 and does not necessarily represent the true rate.

2. Section Number: Form12_Outcome Measure 5**Field Name:** OM05**Row Name:****Column Name:****Year:** 2008**Field Note:**

PERFORMANCE OBJECTIVES: Trend analyses based on the past 14 years have shown a very gradual decrease, resulting in a future objective of 8.2 through 2014.

The rate is determined by [The number of resident fetal deaths greater than 20 weeks gestation plus resident infant deaths within the first 6 days of life divided by the total resident live births plus Fetal deaths]multiplied by 1000. The source for these data is the Washington Center for Health Statistics, Linked Birth and Death Certificate files.

3. Section Number: Form12_Outcome Measure 5**Field Name:** OM05**Row Name:****Column Name:****Year:** 2007**Field Note:**

PERFORMANCE OBJECTIVES: Trend analyses based on the past 14 years have shown a very gradual decrease, resulting in a future objective of 8.2 through 2013.

The rate is determined by [The number of resident fetal deaths greater than 20 weeks gestation plus resident infant deaths within the first 6 days of life divided by the total resident live births plus Fetal deaths]multiplied by 1000. The source for these data is the Washington Center for Health Statistics, Linked Birth and Death Certificate files.

OUTCOME MEASURE # 06

The child death rate per 100,000 children aged 1 through 14.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	17	18.4	16.7	15.3	15
Annual Indicator	15.3	13.8	14.4	15.8	15.8
Numerator	180	165	173	190	
Denominator	1,178,699	1,195,874	1,198,742	1,205,636	
Data Source				WA Center for Health Statistics	WA Center for Health Statistics
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	14.7	14.4	14.1	13.8	13.5
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes1. **Section Number:** Form12_Outcome Measure 6**Field Name:** OM06**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data for child deaths in 2009 not yet available.

The annual indicator reported for this year is the same one reported for 2008 and does not necessarily represent the true rate.

2. **Section Number:** Form12_Outcome Measure 6**Field Name:** OM06**Row Name:****Column Name:****Year:** 2008**Field Note:**

PERFORMANCE OBJECTIVES: A combination of trend analyses, input from the State Injury Program and comparisons to other states were used to create the future objectives, resulting in a 0.3 decrease in the rate every year through 2013.

The source for this data is the Washington Center for Health Statistics Death Certificate files (updated annually between September and October) and reported in Washington State Vital Statistics. The rate reflects deaths to children ages 1-14 from all causes divided by the population ages 1-14. The population figures are from the Washington State Office of Financial Management.

3. **Section Number:** Form12_Outcome Measure 6**Field Name:** OM06**Row Name:****Column Name:****Year:** 2007**Field Note:**

PERFORMANCE OBJECTIVES: A combination of trend analyses, input from the State Injury Program and comparisons to other states were used to create the future objectives, resulting in a 0.3 decrease in the rate every year through 2013.

The source for this data is the Washington Center for Health Statistics Death Certificate files (updated annually between September and October) and reported in Washington State Vital Statistics. The rate reflects deaths to children ages 1-14 from all causes divided by the population ages 1-14. The population figures are from the Washington State Office of Financial Management.

FORM 12
TRACKING HEALTH OUTCOME MEASURES
[SECS 505 (A)(2)(B)(iii) AND 506 (A)(2)(A)(iii)]
STATE: WA

Form Level Notes for Form 12

None

FORM 13
CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS
STATE: WA

1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.

3

2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.

3

3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.

3

4. Family members are involved in service training of CSHCN staff and providers.

3

5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).

3

6. Family members of diverse cultures are involved in all of the above activities.

3

Total Score: 18

Rating Key

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

FORM NOTES FOR FORM 13

None

FIELD LEVEL NOTES

None

FORM 14
LIST OF MCH PRIORITY NEEDS

[Sec. 505(a)(5)]

STATE: WA FY: 2011

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase, list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women, " and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

1. Adequate nutrition and physical activity.
2. Lifestyles free of substance use and addiction.
3. Optimal mental health and healthy relationships.
4. Health equity.
5. Safe and healthy communities.
6. Healthy physical growth and cognitive development.
7. Sexual health and sexual responsibility.
8. Access to preventive and treatment services.
9. Quality screening, identification, intervention, and care coordination.
- 10.

FORM NOTES FOR FORM 14

None

FIELD LEVEL NOTES

None

FORM 15
TECHNICAL ASSISTANCE(TA) REQUEST

STATE: WA

APPLICATION YEAR: 2011

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested (max 250 characters)	Reason(s) Why Assistance Is Needed (max 250 characters)	What State, Organization or Individual Would You suggest Provide the TA (if known) (max 250 characters)
1.	General Systems Capacity Issues If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>N/A</u>	A. Train prenatal, pediatric and genetic service providers and adoption agency staff on genetics issues—issues for prospective parents to consider pre-adoption and for parents releasing children for adoption (e.g family health history)	Training with address the complex health and genetics counseling issues arising for prospective and adoptive parents, birth parents and adopted children.	University of Massachusetts Medical School, Office of Foster Care and Adoption Director, Martha Henry, PhD, and Research Coordinator, Cassandra Perry
2.	National Performance Measure Issues If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>07</u>	Capacity development, training	Assistance to support attendance at immunization training events for community partners, local health, and others increasing immunization rates and addressing parent hesitancy	TBD
3.	Data-related Issues - Data Systems Development If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>N/A</u>	Revise the contract, including required activities, between OMCH and the state's 35 Local Health Jurisdictions (LHJs) to better align with the BG and streamline reporting outcomes.	OMCH will convene a group of LHJ leaders for a collaborative process to revise and better align their contract and its required activities with the MCHBG. This will streamline contract management and reporting for both the LHJ's and OMCH	TBD
4.	Data-related Issues - Data Systems Development If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>N/A</u>	Automating Data Reporting	Maternal and Child Health Assessment (MCHA) staff needs funds for training on how to interface Office products with SAS and STATA to produce reports. This will save precious staff time and provide timely data reports for key OMCH stakeholders	TBD
5.	Data-related Issues - Data Systems Development If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>N/A</u>	Geographic Information System (GIS) Training	MCHA staff needs funds for training on how to use Geographic Information System to produce accurate maps and reflect all forms of geographically needed information on various risk factors and diseases relevant to MCH population	TBD
6.	Data-related Issues - Data Systems Development If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>N/A</u>	Building Capacity and Expertise in Qualitative Research Methods	Most MCHA staff have expertise only in quantitative methods. Using TA funds for training in qualitative methods will allow us complement quantitative methods and strengthen work on program evaluation and needs assessments.	TBD
7.	Data-related Issues - Data Systems Development If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>N/A</u>	Qualitative Research Methods to Support Family Organizations	OMCH needs funding for training and technical assistance to family organizations to increase their capacity to survey and assess quality of life issues they work to improve	TBD
8.	Data-related Issues - Data Systems Development If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>N/A</u>	Western Regional MCH Epidemiology Conference	MCHA requests MCHB sponsor a Western US MCH epidemiology conference Maintaining skills in needs assessment and MCH epidemiology suffers when travel budget cuts keep staff from attending the annual MCH epi conference in the Southeast US.	TBD
9.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			

10.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
11.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
12.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			

FORM NOTES FOR FORM 15

None

FIELD LEVEL NOTES

None

FORM 16
STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET
STATE: WA

SP(Reporting Year) # 1

PERFORMANCE MEASURE:

The percent of pregnancies (live births, fetal deaths, abortions) that are unintended.

STATUS:

Active

GOAL

Reduce the number of unplanned pregnancies.

DEFINITION

THIS SPM IS A CONTINUATION FROM SPM 1 IN THE 2000-2004 NEEDS ASSESSMENT.

Numerator:

Numerator: Estimate of all unintended births from PRAMS data, similar proportion of fetal deaths, plus all abortions.

Denominator:

Denominator: All live births and fetal deaths plus abortions.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

Related to Healthy People 2010 Objective 9-1

Related to Objective 9-1: Increase the proportion of pregnancies that are intended to 70%. (Baseline 51% of all pregnancies among females 15-44 years were intended in 1995)

DATA SOURCES AND DATA ISSUES

PRAMS and WA State Center for Health Statistics abortion data files. This estimate assumes all abortions are the result of unintended pregnancy and that the proportion of fetal deaths which are unintended is the same as the proportion of live births. A small percentage of abortions will be due to fetal or maternal condition and not the result of an unintended pregnancy.

SIGNIFICANCE

Unintended pregnancy is correlated with late or inadequate prenatal care, low birth weight, neonatal death, domestic violence, child abuse, and exposure of the fetus to harmful substances like tobacco, alcohol, and other drugs. It is associated with social and economic co-factors such as economic hardship, marital dissolution, failure to achieve educational goals, and spousal abuse. This is a measure of family planning.

SP(Reporting Year) # 5

PERFORMANCE MEASURE:

Promote the use of Bright Futures materials and principles by health, social service, and education providers in Washington State.

STATUS:

Active

GOAL

Promote the use of Bright Futures materials and principles by health, social service, and education providers in Washington State.

DEFINITION

Description of Bright Futures: Bright Futures is a vision, a philosophy, a set of expert guidelines, and a practical developmental approach to providing health supervision for children of all ages, from birth through adolescence. Bright Futures is endorsed by the American Academy of Pediatrics as an example of "best practices" in health supervision of children and youth. Modules and guidelines also exist on the subjects of mental health, oral health, physical activity, and nutrition. Efforts to promote the use of Bright Futures involve increasing awareness in and outside of DOH, training specific groups of professionals or potential users (like parents), and providing continuing support for those already trained while reaching out to new groups. Assessment of needs, evaluation of interventions, and dissemination of knowledge and practice are integral parts of the outreach and training

Numerator:

The number of performance measure benchmarks Washington has reached towards assessing the usage of Bright Futures materials and principles.

Denominator:

Total number of benchmarks. Please see Field Notes.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Data related focus areas will include: Data will be obtained from trainings provided and programs given by DOH or its contractors. An assessment of use of Bright Futures by health professionals will provide a baseline.

SIGNIFICANCE

Background and significance of Bright Futures materials and principles: Bright Futures materials are designed in a way to be accessible to parents and non-professional caretakers, as well as health care professionals. Increasing access to health services is a priority of state health and political entities. Bright Futures guidelines provide a way to assess and improve the quality of the services, whether they are provided in a clinical setting, a school, or a community setting. Bright Futures also is an accessible and understandable way for child health workers to become familiar with stages of development, and the basics of mental health, oral health, physical activity, and nutrition. A need exists for practical training models and technical assistance to those starting to use Bright Futures.

PERFORMANCE MEASURE:

Percent of children 6-8 years old with dental caries experience in primary and permanent teeth.

STATUS:

Active

GOAL

Reduce the percent of children 6-8 years old with dental caries experience in primary and permanent teeth to the Healthy People 2010 goal of 42% (2005 baseline is 59%). Although the national goal will be sought, it is important to remember that Washington State children currently suffer substantially from dental decay as compared to the nation. The new state program has started to invest heavily in the promotion of water fluoridation and sealants to achieve the HP 2010 target.

DEFINITION

This is an on-going measure using data from the Washington State Smiles Survey.

Numerator:

Children 6-8 years old with dental caries experience in primary and permanent teeth

Denominator:

Children 6-8 years old

Units: 100 **Text:** Percent**HEALTHY PEOPLE 2010 OBJECTIVE**

The Healthy People 2010 Objective for this measure is 42%

Related to Objective 21-1b: Reduce the proportion of children with dental caries experience in their primary and permanent teeth to 42%. (Baseline: 52% of children aged 6 to 8 years had dental caries experience in 1988-1994).

DATA SOURCES AND DATA ISSUES

In order to track the trend of decay experience in our children, the results of the Washington State Smile Survey 1994, 2000, 2005, 2010 will be utilized. Additionally, Washington State's new oral health surveillance system will also provide information. Through these data sources, better monitoring and information distribution about decay experience will take place.

SIGNIFICANCE

Dental caries experience in 6-8 years old is a well-known measure of oral health status. Its reduction has been recommended by the CDC, and is one of the objectives of the national Healthy People document. As progress is made, the heightened awareness and the identification of this new measure is very meaningful to Washington State. Challenges in the accomplishment of this measure include severe staff shortage for the past five years, and not being ranked well in the two most cost-effective preventive measures for dental decay: traditionally observed low rates of water fluoridation, and more recently, a decline in the use of school-based dental sealants. As a consequence, it is expected that Washington children will continue to suffer from substantial dental decay, as reflected in the results of the Smile Survey 2005. The new state oral health program is taking serious steps towards improving this situation, and it will take a lot of effort and partnerships to revert such a scenario. Despite these challenges, confidence remains that a difference and improvement in the lives of Washington children will be attained.

PERFORMANCE MEASURE:

Strengthen statewide system capacity to promote health, safety, and school readiness of children birth to kindergarten entry.

STATUS:

Active

GOAL

Strengthen statewide system capacity to promote health, safety, and school readiness of children birth to kindergarten entry.

DEFINITION

Identify and track OMCH activities that affect the health of young children, and integrate elements of Kids Matter plan into existing and new activities and groups. Healthy Child Care Washington, a system that supports child care health consultants, will become more integrated with Kids Matter through training of professionals and improving data collection, evaluation, and dissemination of knowledge gained.

Numerator:

The number of performance measure benchmarks Washington has reached to increase statewide system capacity to promote health, safety, and school readiness.

Denominator:

Total number of benchmarks. Please see Field Notes.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Data will come from the Child and Adolescent Health Program.

SIGNIFICANCE

The Washington State Department of Health, Maternal and Child Health Office (MCH) has taken a comprehensive approach to building an integrated public health/child care/early childhood framework throughout Washington State in order to ensure the health and safety of the 60-70% of children under age 5 who are estimated to attend out-of-home care. This approach encompasses both the immediate physical needs of children as well as the developmental and emotional health in order to support children's readiness to learn at school entry. MCH activities have focused in five areas: Access to health, Childhood MCH, Early childhood education, and parental and family support. All of these MCH activities aim to provide training and resources to better understand the health status and provide for the developmental needs of children in child care/early childhood.

PERFORMANCE MEASURE:

Use an established framework for ensuring quality screening, identification, intervention, and care coordination for women, infants, children, adolescents, and their families.

STATUS:

Active

GOAL

This is a process measure to assess progress toward implementing a framework that can be used by any program within OMCH. The framework will provide guidance when embarking on a quality improvement (QI) project and will assist programs with tracking the course of the work they are doing relating to quality assurance or improvement. The intent is to establish a single framework and standard to which all programs are accountable and that they can use to guide their work.

DEFINITION

This is a new SPM This process measure is based on a list of all quality improvement initiatives in OMCH and determined by the percentage of those initiatives using the framework.

Numerator:

The numerator is the number of quality improvement initiatives actively using the established framework.

Denominator:

The denominator is derived from all active quality improvement initiatives underway in OMCH during a calendar year.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

The measure is based on a list of all QI initiatives in OMCH and determined by the percentage of those initiatives using the framework. In each block grant cycle, sections will report on where their initiatives were, are, and plan to be within the matrix during the specified time periods.

SIGNIFICANCE

The intent is to establish a single framework and standard to which all programs are accountable and that they can use to guide their work. By instituting this as a process measure, OMCH is adopting a strategy that will help programs effectively make change and allow cross program collaboration and opportunities to collectively plan for allocating resources.

PERFORMANCE MEASURE:

Develop an outcome measure for the Washington State maternal and child health priority of Optimal Mental Health and Healthy Relationships.

STATUS:

Active

GOAL

Identify an outcome measure to represent the collective efforts of multiple sections in the Office of Maternal and Child Health toward optimal mental health and healthy relationships.

DEFINITION

This is a new SPM This is a process measure to track our progress toward the goal by setting benchmarks for significant milestones in the process toward developing an outcome measure. Each benchmark is weighted differently based on level of difficulty or length of time to complete. The timeline in which to achieve 100% completion is May 2008 to April 2009.

Numerator:

The numerator is the sum of all weighted percentages of the benchmarks completed.

Denominator:

The denominator is 100, representing 100% completion of all benchmarks.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE**DATA SOURCES AND DATA ISSUES**

Benchmarks 1)Complete a literature review to identify best practices for achieving specific desirable outcomes.(10%) 2) Identify existing mental health/healthy relationship activities (initiatives)being done in OMCH and identify any new activities that would be appropriate to add.(15%) 3)Determine if OMCH wants to adopt a specific theoretical model for promoting behavior change and use the model to help identify desired outcomes of the identified activities.(10%) 4)Determine short, intermediate, and long term outcomes for each activity.(15%) 5)Identify the short, intermediate, and long term outcomes for which OMCH has direct or primary influence.(10%) 6)Select an outcome, or create a composite outcome, for which OMCH has direct or primary influence.(15%) 7)Identify ways to measure the selected outcome, and if needed, develop the means to collect needed data or information.(15%) 8)Develop an evaluation process for mental health and healthy relationship initiatives.(10%)

SIGNIFICANCE

Identifying a single measure to reflect the work of several programs within the Office of Maternal and Child Health will help us align work across programs in the office and ensure that all programs working toward a common goal will have a measure that holds them accountable.

PERFORMANCE MEASURE:

Identify health disparities, develop and implement interventions to address disparities, and evaluate the effectiveness of interventions in achieving health equity.

STATUS:

Active

GOAL

Assess internal efforts to identify health disparities and work toward achieving health equity.

DEFINITION

This is a process measure based on a self assessment by each section in the Office of Maternal and Child Health of its efforts to reduce health disparities. It measures efforts to build infrastructure and capacity within OMCH to achieve health equity in the maternal and child population.

Numerator:

The numerator is the sum of the self-assessment scores from each section.

Denominator:

The denominator the total number of sections who completed a self assessment.

Units: 1000 **Text:** Rate

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

The measure is an average of scores from each section. For example, each section will conduct a self assessment and determine how many of the eight criteria it meets. Each section receives a score of 1, 2, or 3 depending on how many of the eight selected criteria it meets: 1 = meets <4 criteria; 2 = meets 4 to 7 of the criteria; 3 = meets all 8. The scores are averaged to reach an office-wide score. Please see field notes for the criteria.

SIGNIFICANCE

Setting standards and expectations for identifying and addressing health disparities will hold each section within the Office of Maternal and Child Health accountable to the "Health Equity" priority. Within the next one to years, we will identify or develop an outcome measure to reflect the combined efforts of all the sections.

FORM 17
HEALTH SYSTEMS CAPACITY INDICATORS
FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA
STATE: WA

Form Level Notes for Form 17

None

HEALTH SYSTEMS CAPACITY MEASURE # 01

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	29.2	25.3	21.6	22.2	
Numerator	1,187	1,042	909	962	
Denominator	405,992	412,285	420,384	433,346	

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #01

Field Name: HSC01

Row Name:

Column Name:

Year: 2009

Field Note:

CHARS data on hospitalizations for 2009 are not yet available.

2. **Section Number:** Form17_Health Systems Capacity Indicator #01

Field Name: HSC01

Row Name:

Column Name:

Year: 2008

Field Note:

Data for this Health Systems Capacity Indicator (HSCI01) are gathered from the Comprehensive Hospital Abstract Reporting System (CHARS), Washington State's hospital discharge database. The numerator represents the number of hospital discharges for children less than 5 years of age who had a primary diagnosis of asthma (ICD-9 codes 493.0-493.9). The data was accessed using the Community Health Assessment Tool (CHAT) software.

3. **Section Number:** Form17_Health Systems Capacity Indicator #01

Field Name: HSC01

Row Name:

Column Name:

Year: 2007

Field Note:

Data for this Health Systems Capacity Indicator (HSCI01) are gathered from the Comprehensive Hospital Abstract Reporting System (CHARS), Washington State's hospital discharge database. The numerator represents the number of hospital discharges for children less than 5 years of age who had a primary diagnosis of asthma (ICD-9 codes 493.0-493.9). The data was accessed using VISTAPHw software.

HEALTH SYSTEMS CAPACITY MEASURE # 02

The percent Medicaid enrollees whose age is less than one year during the reporting year who received at least one initial periodic screen.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>99.1</u>	<u>99.0</u>	<u>99.1</u>	<u>98.8</u>	<u>98.9</u>
Numerator	<u>36,986</u>	<u>38,087</u>	<u>43,527</u>	<u>45,528</u>	<u>47,878</u>
Denominator	<u>37,322</u>	<u>38,472</u>	<u>43,923</u>	<u>46,081</u>	<u>48,410</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes

1. Section Number: Form17_Health Systems Capacity Indicator #02

Field Name: HSC02

Row Name:

Column Name:

Year: 2009

Field Note:

These data are based on the Washington State 2009 Health Effectiveness Data and Information Set (HEDIS) Report from the Department of Social and Health Services and reflect the estimated statewide proportion of children who turned 15 months old during the reporting year, who were enrolled from 31 days of age in Medicaid or State Children's Health Insurance Program (SCHIP) and who received at least one well child visit. Data from seven managed care plans (who serve approximately 70% of the Medicaid enrollees less than 15 months) contributed to this report and are the source of the indicator percentage. Children not covered by managed care plans include those on Supplemental Security Income (SSI), in foster care, and residents who live in counties without a managed care option.

2. Section Number: Form17_Health Systems Capacity Indicator #02

Field Name: HSC02

Row Name:

Column Name:

Year: 2008

Field Note:

These data are based on the Washington State 2008 HEDIS Report from the Department of Social and Health Services and reflect the estimated statewide proportion of children who turned 15 months old during the reporting year, who were enrolled from 31 days of age in Medicaid or SCHIP and who received at least one well child visit. Data from seven managed care plans (who serve approximately 70% of the Medicaid enrollees less than 15 months) contributed to this report and are the source of the indicator percentage. Children not covered by managed care plans include those on SSI, in foster care, and residents who live in counties without a managed care option.

3. Section Number: Form17_Health Systems Capacity Indicator #02

Field Name: HSC02

Row Name:

Column Name:

Year: 2007

Field Note:

These data are based on the Washington State 2007 HEDIS Report from the Department of Social and Health Services and reflect the estimated statewide proportion of children who turned 15 months old during the reporting year, who were enrolled from 31 days of age in Medicaid or SCHIP and who received at least one well child visit. Data from seven managed care plans (who serve approximately 70% of the Medicaid enrollees less than 15 months) contributed to this report. Children not covered by managed care plans include those on SSI, in foster care, and residents who live in counties without a managed care option.

HEALTH SYSTEMS CAPACITY MEASURE # 03

The percent State Childrens Health Insurance Program (SCHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>
Numerator	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Denominator	<u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #03

Field Name: HSC03

Row Name:

Column Name:

Year: 2009

Field Note:

Data are unavailable for 2009. We don't expect to be able to report on this measure for 2009 because data specific to SCHIP enrollees are not available through HEDIS for this age group. Washington SCHIP covers from 200 to 250% of the poverty level. In Washington, children are covered by SCHIP and Medicaid in much the same way. There is no reason to suspect a difference in levels of coverage.

2. **Section Number:** Form17_Health Systems Capacity Indicator #03

Field Name: HSC03

Row Name:

Column Name:

Year: 2008

Field Note:

Data are unavailable for 2008. We don't expect to be able to report on this measure for 2008 because data specific to SCHIP enrollees are not available through HEDIS for this age group. Washington SCHIP covers from 200 to 250% of the poverty level. In Washington, children are covered by SCHIP and Medicaid in much the same way. There is no reason to suspect a difference in levels of coverage.

3. **Section Number:** Form17_Health Systems Capacity Indicator #03

Field Name: HSC03

Row Name:

Column Name:

Year: 2007

Field Note:

Data are unavailable for 2007. We don't expect to be able to report on this measure for 2007 because data specific to SCHIP enrollees are not available through HEDIS for this age group. Washington SCHIP covers from 200 to 250% of the poverty level. In Washington, children are covered by SCHIP and Medicaid in much the same way. There is no reason to suspect a difference in levels of coverage.

HEALTH SYSTEMS CAPACITY MEASURE # 04

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>68.0</u>	<u>66.3</u>	<u>64.8</u>	<u>65.5</u>	<u> </u>
Numerator	<u>43,866</u>	<u>47,222</u>	<u>49,154</u>	<u>51,181</u>	<u> </u>
Denominator	<u>64,482</u>	<u>71,244</u>	<u>75,895</u>	<u>78,167</u>	<u> </u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #04

Field Name: HSC04

Row Name:

Column Name:

Year: 2009

Field Note:

Birth data for 2009 are not yet available.

2. **Section Number:** Form17_Health Systems Capacity Indicator #04

Field Name: HSC04

Row Name:

Column Name:

Year: 2008

Field Note:

These data were obtained from the First Steps Database, Washington State Department of Social and Health Services, and are gathered from 2008 Washington State Birth Certificate files.

The numerator represents the number of resident women (ages 15-44) with a live birth whose Adequacy of Prenatal Care Utilization index is greater than or equal to 80%. The denominator represents all resident women (ages 15-44) with a live birth during the reporting year.

3. **Section Number:** Form17_Health Systems Capacity Indicator #04

Field Name: HSC04

Row Name:

Column Name:

Year: 2007

Field Note:

These data were obtained from the First Steps Database, Washington State Department of Social and Health Services, and are gathered from 2007 Washington State Birth Certificate files.

The numerator represents the number of resident women (ages 15-44) with a live birth whose Adequacy of Prenatal Care Utilization index is greater than or equal to 80%. The denominator represents all resident women (ages 15-44) with a live birth during the reporting year.

HEALTH SYSTEMS CAPACITY MEASURE # 07A

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>87.3</u>	<u>88.0</u>	<u>88.5</u>	<u>94.0</u>	<u> </u>
Numerator	<u>590,014</u>	<u>593,536</u>	<u>590,175</u>	<u>675,399</u>	<u> </u>
Denominator	<u>676,232</u>	<u>674,373</u>	<u>666,834</u>	<u>718,496</u>	<u> </u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes**1. Section Number:** Form17_Health Systems Capacity Indicator #07A**Field Name:** HSC07A**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data are not yet available

2. Section Number: Form17_Health Systems Capacity Indicator #07A**Field Name:** HSC07A**Row Name:****Column Name:****Year:** 2008**Field Note:**

Technical Note: The source of these data is the Client Services Database, Research Data and Analysis, Washington State Department of Social and Health Services; and Office of Financial Management. The numerator represents clients aged 1 to 21 years who are receiving medical assistance; it includes both managed care and fee for service clients. The data in the denominator are the total number of medically eligible clients aged 1 to 21 years old.

*SCHIP children are included in managed care

*Data is gathered from the Client Service Database, which does not get medical managed care encounter information. Therefore it does not measure the types of services received for children enrolled in managed care. Being enrolled in a managed care plan counts as receiving medical services, regardless of whether the child visited a health professional or not.

3. Section Number: Form17_Health Systems Capacity Indicator #07A**Field Name:** HSC07A**Row Name:****Column Name:****Year:** 2007**Field Note:**

Technical Note: The source of these data is the Client Services Database, Research Data and Analysis, Washington State Department of Social and Health Services; and Office of Financial Management. The numerator represents clients aged 1 to 21 years who are receiving medical assistance; it includes both managed care and fee for service clients. The data in the denominator are the total number of medically eligible clients aged 1 to 21 years old.

*SCHIP children are included in managed care

*Data is gathered from the Client Service Database, which does not get medical managed care encounter information. Therefore it does not measure the types of services received for children enrolled in managed care. Being enrolled in a managed care plan counts as receiving medical services, regardless of whether the child visited a health professional or not.

Medically Eligible Title XIX description:

Clients who are eligible to receive medical services for which the state receives federal Title XIX matching funds. Title XIX of the Social Security Act funds:

(1) medical assistance on behalf of families with dependent children, whose income and resources are insufficient to meet the costs of necessary medical services, and of aged, blind, or disabled individuals.

(2) rehabilitation and other services to help such families and individuals attain or retain capability for independence or self-care.

HEALTH SYSTEMS CAPACITY MEASURE # 07B

The percent of EPSDT eligible children aged 6 through 9 years who have received any dental services during the year.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>56.5</u>	<u>57.0</u>	<u>59.1</u>	<u>60.3</u>	<u>62.4</u>
Numerator	<u>73,259</u>	<u>76,404</u>	<u>78,397</u>	<u>81,395</u>	<u>90,495</u>
Denominator	<u>129,672</u>	<u>133,948</u>	<u>132,761</u>	<u>134,958</u>	<u>145,127</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #07B

Field Name: HSC07B

Row Name:

Column Name:

Year: 2009

Field Note:

These data come from the Washington State Department of Social and Health Services Medical Assistance Administration (MAA). The numerator represents the number of Medicaid enrolled children 6-9 who received any dental service in 2009. The denominator represents the total number of children ages 6-9 enrolled in Medicaid in 2009, in both Healthy Options (the MAA managed care program) and fee-for-service.

2. **Section Number:** Form17_Health Systems Capacity Indicator #07B

Field Name: HSC07B

Row Name:

Column Name:

Year: 2008

Field Note:

These data come from the Washington State Department of Social and Health Services Medical Assistance Administration (MAA). The numerator represents the number of Medicaid enrolled children 6-9 who received any dental service in 2008. The denominator represents the total number of children ages 6-9 enrolled in Medicaid in 2008, in both Healthy Options (the MAA managed care program) and fee-for-service.

3. **Section Number:** Form17_Health Systems Capacity Indicator #07B

Field Name: HSC07B

Row Name:

Column Name:

Year: 2007

Field Note:

These data come from the Washington State Department of Social and Health Services Medical Assistance Administration (MAA). The numerator represents the number of Medicaid enrolled children 6-9 who received any dental service in 2007. The denominator represents the total number of children ages 6-9 enrolled in Medicaid in 2007, in both Healthy Options (the MAA managed care program) and fee-for-service.

These data are provisional.

HEALTH SYSTEMS CAPACITY MEASURE # 08

The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>6.1</u>	<u>5.9</u>	<u>5.5</u>	<u>5.4</u>	<u>5.6</u>
Numerator	<u>875</u>	<u>897</u>	<u>860</u>	<u>749</u>	<u>810</u>
Denominator	<u>14,300</u>	<u>15,217</u>	<u>15,720</u>	<u>13,907</u>	<u>14,537</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #08

Field Name: HSC08

Row Name:

Column Name:

Year: 2009

Field Note:

The sources of these data are the Washington State CSHCN Child Health Intake Form (CHIF) database and the Federal Social Security Administration (SSA). The numerator is the unduplicated number of children under the age of 18 with a CHIF form completed indicating they have SSI coverage in 2008. The age of 18 is used as SSA does not report numbers under age 16 separately. The denominator is from state-specific data from Children Receiving Supplemental Security Income (SSI), 2009. In Washington, this target is set low because Medicaid provides extensive benefits and the CSHCN program is the payor of last resort.

2. **Section Number:** Form17_Health Systems Capacity Indicator #08

Field Name: HSC08

Row Name:

Column Name:

Year: 2008

Field Note:

The sources of these data are the Washington State CSHCN Child Health Intake Form (CHIF) database and the Federal Social Security Administration (SSA). The numerator is the unduplicated number of children under the age of 18 with a CHIF form completed indicating they have SSI coverage in 2008. The age of 18 is used as SSA does not report numbers under age 16 separately. The denominator is from state-specific data from Children Receiving Supplemental Security Income (SSI), 2008. In Washington, this target is set low because Medicaid provides extensive benefits and the CSHCN program is the payor of last resort.

3. **Section Number:** Form17_Health Systems Capacity Indicator #08

Field Name: HSC08

Row Name:

Column Name:

Year: 2007

Field Note:

The sources of these data are the Washington State CSHCN Child Health Intake Form (CHIF) database and the Federal Social Security Administration (SSA). The numerator is the unduplicated number of children under the age of 18 with a CHIF form completed indicating they have SSI coverage in 2007 (860). The age of 18 is used as SSA does not report numbers under age 16 separately. The denominator is from state-specific data from Children Receiving SSI, 2007. In Washington, this target is set low because Medicaid provides extensive benefits and the CSHCN program is the payor of last resort.

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #05
(MEDICAID AND NON-MEDICAID COMPARISON)
STATE: WA

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) <i>Percent of low birth weight (< 2,500 grams)</i>	2008	Matching data files	<u>6.6</u>	<u>6.1</u>	<u>6.3</u>
b) <i>Infant deaths per 1,000 live births</i>	2007	Matching data files	<u>6.4</u>	<u>3.5</u>	<u>4.9</u>
c) <i>Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester</i>	2008	Matching data files	<u>66.6</u>	<u>87</u>	<u>77.1</u>
d) <i>Percent of pregnant women with adequate prenatal care (observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])</i>	2008	Matching data files	<u>58.6</u>	<u>71.9</u>	<u>65.5</u>

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06(MEDICAID ELIGIBILITY LEVEL)
STATE: WA

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL MEDICAID (Valid range: 100-300 percent)
a) <i>Infants (0 to 1)</i>	2008	<div style="text-align: right;">200</div>
b) <i>Medicaid Children</i> (Age range <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;">1</div> to <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;">18</div>) (Age range <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;"></div> to <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;"></div>) (Age range <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;"></div> to <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;"></div>)	2008	<div style="text-align: right;">200</div> <div style="text-align: right;"><div style="border-bottom: 1px solid black; width: 40px;"></div></div> <div style="text-align: right;"><div style="border-bottom: 1px solid black; width: 40px;"></div></div>
c) <i>Pregnant Women</i>	2008	<div style="text-align: right;">185</div>

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06(SCHIP ELIGIBILITY LEVEL)
STATE: WA

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL SCHIP
a) <i>Infants (0 to 1)</i>	2008	<div style="border-bottom: 1px solid black; width: 100px; margin: 0 auto;">300</div>
b) <i>Medicaid Children</i> (Age range <div style="border-bottom: 1px solid black; width: 20px; display: inline-block;"></div> 1 to <div style="border-bottom: 1px solid black; width: 20px; display: inline-block;"></div> 18) (Age range <div style="border-bottom: 1px solid black; width: 20px; display: inline-block;"></div> to <div style="border-bottom: 1px solid black; width: 20px; display: inline-block;"></div>) (Age range <div style="border-bottom: 1px solid black; width: 20px; display: inline-block;"></div> to <div style="border-bottom: 1px solid black; width: 20px; display: inline-block;"></div>)	2008	<div style="border-bottom: 1px solid black; width: 100px; margin: 0 auto;">300</div> <div style="border-bottom: 1px solid black; width: 100px; margin: 0 auto;"></div> <div style="border-bottom: 1px solid black; width: 100px; margin: 0 auto;"></div>
c) <i>Pregnant Women</i>	2008	<div style="border-bottom: 1px solid black; width: 100px; margin: 0 auto;"></div>

FORM NOTES FOR FORM 18

HSCI5: Comparison of health indicators for Medicaid, non-Medicaid, and all populations in the State.

These data reflect the infant mortality rate for 2007 using a birth cohort definition. Thus, the number is based on the number of Medicaid and non-Medicaid infants born in 2007 who died in their infancy (so the death may have occurred in 2007 or in 2008). The overall rate for this HSI differs from the calendar year 2008 period infant mortality rate for outcome measure 01. Outcome measure 01 is a period mortality rate and reflects the total number of infant deaths during calendar year 2008 divided by the total number of live births in calendar year 2008.

The percent of missing data (unknown and excluded) for the Medicaid and Non-Medicaid comparisons are: LBW: 0.1% Medicaid, 0.3% Non-Medicaid; First trimester PNC: 5.9% Medicaid, 8.1% Non-Medicaid, Adequate PNC: 11.0% Medicaid and 12.9% non-Medicaid.

HSCI6: The percent of poverty level for eligibility in the State's Medicaid and SCHIP programs for infants (0 to 1), children, and pregnant women.

The source of these data are the Washington State Poverty Guidelines. The source for SCHIP eligibility comes from the Model Application Template For State Child Health Plan under Title XXI of the Social Security Act State Children's Health Insurance Program. SCHIP eligibility should read 201 to <=250 percent FPL.

FIELD LEVEL NOTES

1. **Section Number:** Form18_Indicator 06 - SCHIP

Field Name: SCHIP_Women

Row Name: Pregnant Women

Column Name:

Year: 2011

Field Note:

SCHIP eligibility open to children only.

2. **Section Number:** Form18_Indicator 05

Field Name: CareFirstTrimester

Row Name: Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester

Column Name:

Year: 2011

Field Note:

These data come from a different source, the First Steps Database, WA State Department of Social and Health Services, than do the data reported in NPM 18 which are from birth certificate data prepared by the WA Center for Health Statistics.

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: WA

HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)
(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Information)

DATABASES OR SURVEYS	Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *	Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)
ANNUAL DATA LINKAGES		
Annual linkage of infant birth and infant death certificates	3	Yes
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	3	No
Annual linkage of birth certificates and WIC eligibility files	2	No
Annual linkage of birth certificates and newborn screening files	3	Yes
REGISTRIES AND SURVEYS		
Hospital discharge survey for at least 90% of in-State discharges	3	Yes
Annual birth defects surveillance system	1	Yes
Survey of recent mothers at least every two years (like PRAMS)	3	Yes

*Where:
1 = No, the MCH agency does not have this ability.
2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.
3 = Yes, the MCH agency always has this ability.

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: WA

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	1	No
Other: Healthy Youth Survey	3	Yes

*Where:
1 = No
2 = Yes, the State participates but the sample size is not large enough for valid statewide estimates for this age group.
3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

Notes:
1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

FORM NOTES FOR FORM 19

Annual Data Linkages:

The Department of Health initiated an internal data sharing agreement to link the WIC eligibility files with the PRAMS survey data and the birth certificates for 1999-2001. The Office of Maternal and Child Health (OMCH) has access to the WIC linked data. There are tentative plans to repeat this linkage in future years.

The Department of Health has an internal data sharing agreement to link non-confidential birth certificate information with the newborn screening database. Recently this data sharing agreement was amended to include EHDDI, and there are plans to further amend it to include MCH Assessment. We use this information to monitor the children screened, and assures that children have access to treatment as necessary. Over 97% of children born in Washington are screened using this methodology.

Although OMCH does not have direct access to the Medicaid data, we have a strong history of collaboration with our partners to obtain data needed for program planning.

Registries and Surveys: Washington has a passive birth defects surveillance system (BDSS) based on hospital discharge data. The BDSS is working on improving compliance with reporting requirements, enhancing data validation efforts, and boosting the data linkage to birth, fetal death and death certificates. While Washington participates in the national YRBS if sampled, we do not do a state YRBS. Instead Washington administers its own youth survey, the Healthy Youth Survey (HYS), to students in Grades 6, 8, 10 and 12 every two years. The HYS is a collaborative effort with other state agencies including the Department of Health, the Office of the Superintendent of Public Instruction, the Department of Social and Health Service's Division of Alcohol and Substance Abuse and other agencies. Most of the survey questions come from national youth surveys such as the YRBS, Youth Tobacco Survey and the Monitoring the Future survey. The HYS will be administered next in Fall 2010.

FIELD LEVEL NOTES

1. **Section Number:** Form19_Indicator 09A

Field Name: BirthDefects

Row Name: Annual birth defects surveillance system

Column Name:

Year: 2011

Field Note:

Due to lack of full funding Washington is unable to meet all of the requirements to rank a "3" on this form. A back log of data still to be obtained from participating hospitals.

FORM 20
HEALTH STATUS INDICATORS #01-#05
MULTI-YEAR DATA
STATE: WA

Form Level Notes for Form 20

None

HEALTH STATUS INDICATOR MEASURE # 01A

The percent of live births weighing less than 2,500 grams.

	<u>Annual Indicator Data</u>				
	2005	2006	2007	2008	2009
Annual Indicator	6.1	6.5	6.3	6.4	
Numerator	5,040	5,659	5,625	5,723	
Denominator	82,625	86,845	88,803	90,091	

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer
 than 5 and therefore a 3-year moving average cannot be
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes

- Section Number:** Form20_Health Status Indicator #01A

Field Name: HSI01A

Row Name:

Column Name:

Year: 2009

Field Note:

Data are not yet available

- Section Number:** Form20_Health Status Indicator #01A

Field Name: HSI01A

Row Name:

Column Name:

Year: 2008

Field Note:

The source for these data are 2008 Natality Table D5 reported in the Washington Center for Health Statistics Birth Certificate files (updated annually between September and October).

- Section Number:** Form20_Health Status Indicator #01A

Field Name: HSI01A

Row Name:

Column Name:

Year: 2007

Field Note:

The source for these data are 2007 Natality Table D5 reported in the Washington Center for Health Statistics Birth Certificate files (updated annually between September and October).

HEALTH STATUS INDICATOR MEASURE # 01B

The percent of live singleton births weighing less than 2,500 grams.

		Annual Indicator Data			
	2005	2006	2007	2008	2009
Annual Indicator	<u>4.7</u>	<u>5.0</u>	<u>4.9</u>	<u>4.7</u>	<u> </u>
Numerator	<u>3,765</u>	<u>4,213</u>	<u>4,197</u>	<u>4,136</u>	<u> </u>
Denominator	<u>80,109</u>	<u>84,081</u>	<u>86,098</u>	<u>87,104</u>	<u> </u>
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	

Field Level Notes**1. Section Number:** Form20_Health Status Indicator #01B**Field Name:** HSI01B**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data on 2009 WA resident live births not yet available.

2. Section Number: Form20_Health Status Indicator #01B**Field Name:** HSI01B**Row Name:****Column Name:****Year:** 2008**Field Note:**

Data trends have shown relatively flat rates since 1999. The source for these data are 2008 Natality Tables D5 reported in the Washington Center for Health Statistics Birth Certificate files (updated annually between September and October).

3. Section Number: Form20_Health Status Indicator #01B**Field Name:** HSI01B**Row Name:****Column Name:****Year:** 2007**Field Note:**

Data trends have shown relatively flat rates since 1999. The source for these data are 2007 Natality Tables D5 reported in the Washington Center for Health Statistics Birth Certificate files (updated annually between September and October).

HEALTH STATUS INDICATOR MEASURE # 02A

The percent of live births weighing less than 1,500 grams.

		Annual Indicator Data			
	2005	2006	2007	2008	2009
Annual Indicator	<u>0.9</u>	<u>1.0</u>	<u>1.1</u>	<u>1.1</u>	<u></u>
Numerator	<u>750</u>	<u>872</u>	<u>965</u>	<u>969</u>	<u></u>
Denominator	<u>82,625</u>	<u>86,845</u>	<u>88,803</u>	<u>90,091</u>	<u></u>
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	

Field Level Notes

- Section Number:** Form20_Health Status Indicator #02A

Field Name: HSI02A**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data on 2009 WA resident live births not yet available.

- Section Number:** Form20_Health Status Indicator #02A

Field Name: HSI02A**Row Name:****Column Name:****Year:** 2008**Field Note:**

The source for these data are 2008 Natality Table D5 reported in the Washington Center for Health Statistics Birth Certificate files (updated annually between September and October).

- Section Number:** Form20_Health Status Indicator #02A

Field Name: HSI02A**Row Name:****Column Name:****Year:** 2007**Field Note:**

The source for these data are 2007 Natality Table D5 reported in the Washington Center for Health Statistics Birth Certificate files (updated annually between September and October).

HEALTH STATUS INDICATOR MEASURE # 02B

The percent of live singleton births weighing less than 1,500 grams.

		Annual Indicator Data			
	2005	2006	2007	2008	2009
Annual Indicator	<u>0.7</u>	<u>0.8</u>	<u>0.8</u>	<u>0.8</u>	<u> </u>
Numerator	<u>568</u>	<u>652</u>	<u>721</u>	<u>667</u>	<u> </u>
Denominator	<u>80,109</u>	<u>84,081</u>	<u>86,098</u>	<u>87,104</u>	<u> </u>
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	

Field Level Notes**1. Section Number:** Form20_Health Status Indicator #02B**Field Name:** HSI02B**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data on 2009 WA resident live births not yet available.

2. Section Number: Form20_Health Status Indicator #02B**Field Name:** HSI02B**Row Name:****Column Name:****Year:** 2008**Field Note:**

Singleton VLBW rates show no clear trend and has been very stable since the mid-1990s. The source for these data are 2008 Natality Table D5 reported in the Washington Center for Health Statistics Birth Certificate files (updated annually between September and October).

3. Section Number: Form20_Health Status Indicator #02B**Field Name:** HSI02B**Row Name:****Column Name:****Year:** 2007**Field Note:**

Singleton VLBW rates show no clear trend and has been very stable since the mid-1990s. The source for these data are 2007 Natality Table D5 reported in the Washington Center for Health Statistics Birth Certificate files (updated annually between September and October).

HEALTH STATUS INDICATOR MEASURE # 03A

The death rate per 100,000 due to unintentional injuries among children aged 14 years and younger.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>7.3</u>	<u>6.7</u>	<u>5.6</u>	<u>5.9</u>	<u> </u>
Numerator	<u>92</u>	<u>85</u>	<u>72</u>	<u>76</u>	<u> </u>
Denominator	<u>1,259,643</u>	<u>1,270,785</u>	<u>1,281,739</u>	<u>1,295,245</u>	<u> </u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #03A

Field Name: HSI03A

Row Name:

Column Name:

Year: 2009

Field Note:

Injury data for 2009 not yet available.

2. **Section Number:** Form20_Health Status Indicator #03A

Field Name: HSI03A

Row Name:

Column Name:

Year: 2008

Field Note:

The rate is determined by (the number of unintentional injury death among children 14 years and younger divided by children ages 14 years and under). The numerator is provided by the Washington State Department of Health Injury and Violence Program. Data were accessed via the Community Health Assessment Tool (CHAT).

3. **Section Number:** Form20_Health Status Indicator #03A

Field Name: HSI03A

Row Name:

Column Name:

Year: 2007

Field Note:

The rate is determined by (the number of unintentional injury death among children 14 years and younger divided by children ages 14 years and under). The numerator is gathered from the Washington State Department of Health Injury and Violence Program. The denominator is gathered from the Office of Financial Management Population Forecast.

HEALTH STATUS INDICATOR MEASURE # 03B

The death rate per 100,000 for unintentional injuries among children aged 14 years and younger due to motor vehicle crashes.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	3.1	1.7	2.0	1.1	
Numerator	39	21	26	14	
Denominator	1,259,643	1,270,785	1,281,739	1,295,245	

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #03B

Field Name: HSI03B

Row Name:

Column Name:

Year: 2009

Field Note:

Injury data for 2009 not yet available.

2. **Section Number:** Form20_Health Status Indicator #03B

Field Name: HSI03B

Row Name:

Column Name:

Year: 2008

Field Note:

The rate is determined by calculating the number of unintentional injury deaths among children 14 years and younger due to motor vehicle crashes divided by the number of children age 14 years and under. The numerator is provided by the Washington State Department of Health Injury and Violence Program. Data were accessed via the Community Health Assessment Tool (CHAT).

3. **Section Number:** Form20_Health Status Indicator #03B

Field Name: HSI03B

Row Name:

Column Name:

Year: 2007

Field Note:

The rate is determined by calculating the number of unintentional injury deaths among children 14 years and younger due to motor vehicle crashes divided by the number of children age 14 years and under. The numerator is gathered from the Washington State Department of Health Injury and Violence Program. The denominator is gathered from the Office of Financial Management Population Forecast.

HEALTH STATUS INDICATOR MEASURE # 03C

The death rate per 100,000 from unintentional injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>17.8</u>	<u>21.7</u>	<u>17.9</u>	<u>13.2</u>	<u> </u>
Numerator	<u>160</u>	<u>200</u>	<u>168</u>	<u>125</u>	<u> </u>
Denominator	<u>898,864</u>	<u>921,059</u>	<u>938,320</u>	<u>946,777</u>	<u> </u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #03C

Field Name: HSI03C

Row Name:

Column Name:

Year: 2009

Field Note:

Injury data for 2009 not yet available.

2. **Section Number:** Form20_Health Status Indicator #03C

Field Name: HSI03C

Row Name:

Column Name:

Year: 2008

Field Note:

The rate is determined by the number of unintentional injury deaths among children ages 15 to 24 years divided by the number of children age 15 to 24 years. The numerator is gathered from the Washington State Department of Health Injury and Violence Program. Data were accessed via the Community Health Assessment Tool (CHAT).

3. **Section Number:** Form20_Health Status Indicator #03C

Field Name: HSI03C

Row Name:

Column Name:

Year: 2007

Field Note:

The rate is determined by the number of unintentional injury deaths among children ages 15 to 24 years divided by the number of children age 15 to 24 years. The numerator is gathered from the Washington State Department of Health Injury and Violence Program. The denominator is gathered from the Office of Financial Management Population Forecast.

HEALTH STATUS INDICATOR MEASURE # 04A

The rate per 100,000 of all nonfatal injuries among children aged 14 years and younger.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>180.2</u>	<u>162.9</u>	<u>157.1</u>	<u>170.3</u>	<u> </u>
Numerator	<u>2,271</u>	<u>2,070</u>	<u>2,014</u>	<u>2,206</u>	<u> </u>
Denominator	<u>1,260,009</u>	<u>1,270,785</u>	<u>1,281,739</u>	<u>1,295,245</u>	<u> </u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #04A

Field Name: HSI04A

Row Name:

Column Name:

Year: 2009

Field Note:

Injury data for 2009 not yet available.

2. **Section Number:** Form20_Health Status Indicator #04A

Field Name: HSI04A

Row Name:

Column Name:

Year: 2008

Field Note:

The rate is determined by (the number of nonfatal injuries among children 14 years and younger divided by children ages 14 years and under). The numerator is gathered from the Washington State Department of Health Injury and Violence Program. Data were accessed via the Community Health Assessment Tool (CHAT).

3. **Section Number:** Form20_Health Status Indicator #04A

Field Name: HSI04A

Row Name:

Column Name:

Year: 2007

Field Note:

The rate is determined by (the number of nonfatal injuries among children 14 years and younger divided by children ages 14 years and under). The numerator is gathered from the Washington State Department of Health Injury and Violence Program. The denominator is gathered from the Office of Financial Management Population Forecast.

From 1999 - 2003, the non-fatal hospitalization rate for children and youth ages 0-14 declined significantly. However, in 2004 and 2005, the rates were higher than in 2002 and 2003. In 2007 the rates showed a decline for the second year in a row, below the 2004 rate and approximating the 2003 rate.

HEALTH STATUS INDICATOR MEASURE # 04B

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among children aged 14 years and younger.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	19.4	17.2	13.9	16.6	
Numerator	244	218	178	215	
Denominator	1,259,643	1,270,785	1,281,739	1,295,245	

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #04B

Field Name: HSI04B

Row Name:

Column Name:

Year: 2009

Field Note:

Injury data for 2009 not yet available.

2. **Section Number:** Form20_Health Status Indicator #04B

Field Name: HSI04B

Row Name:

Column Name:

Year: 2008

Field Note:

The rate is determined by the number of nonfatal injuries due to motor vehicle crashes among children 14 years and younger divided by the population of children ages 14 years and under. The numerator is gathered from the Washington State Department of Health Injury and Violence Program. Data were accessed via the Community Health Assessment Tool (CHAT).

3. **Section Number:** Form20_Health Status Indicator #04B

Field Name: HSI04B

Row Name:

Column Name:

Year: 2007

Field Note:

The rate is determined by the number of nonfatal injuries due to motor vehicle crashes among children 14 years and younger divided by the population of children ages 14 years and under. The numerator is gathered from the Washington State Department of Health Injury and Violence Program. The denominator is gathered from the Office of Financial Management Population Forecast.

HEALTH STATUS INDICATOR MEASURE # 04C

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	2005	2006	Annual Indicator Data		
			2007	2008	2009
Annual Indicator	113.5	106.0	95.3	81.2	
Numerator	1,020	976	894	769	
Denominator	898,864	921,059	938,320	946,777	

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #04C

Field Name: HSI04C

Row Name:

Column Name:

Year: 2009

Field Note:

Injury data for 2009 not yet available.

2. **Section Number:** Form20_Health Status Indicator #04C

Field Name: HSI04C

Row Name:

Column Name:

Year: 2008

Field Note:

The rate is determined by the number of nonfatal injuries due to motor vehicle crashes among children age 15 through 24 divided by the population of children age 15 through 24. The numerator is gathered from the Washington State Department of Health Injury and Violence Program. Data were accessed via the Community Health Assessment Tool (CHAT).

2008 data show a continuing downward trend after a spike in the rate which culminated in 2005.

3. **Section Number:** Form20_Health Status Indicator #04C

Field Name: HSI04C

Row Name:

Column Name:

Year: 2007

Field Note:

The rate is determined by the number of nonfatal injuries due to motor vehicle crashes among children age 15 through 24 divided by the population of children age 15 through 24. The numerator is gathered from the Washington State Department of Health Injury and Violence Program. The denominator is gathered from the Office of Financial Management Population Forecast.

2007 data show a continuing downward trend after a spike in the rate which culminated in 2005.

HEALTH STATUS INDICATOR MEASURE # 05A

The rate per 1,000 women aged 15 through 19 years with a reported case of chlamydia.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>22.7</u>	<u>21.1</u>	<u>21.3</u>	<u>23.3</u>	<u>24.0</u>
Numerator	<u>4,990</u>	<u>4,717</u>	<u>4,859</u>	<u>5,353</u>	<u>5,504</u>
Denominator	<u>219,516</u>	<u>223,862</u>	<u>227,994</u>	<u>229,650</u>	<u>229,115</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #05A

Field Name: HSI05A

Row Name:

Column Name:

Year: 2009

Field Note:

The data, numerator, denominator and rate are provided by the Washington State Department of Health, Office of Infectious Disease and Reproductive Health.

2. **Section Number:** Form20_Health Status Indicator #05A

Field Name: HSI05A

Row Name:

Column Name:

Year: 2008

Field Note:

The rate is determined by the number of women age 15 through 19 with a reported case of Chlamydia divided by the population of women age 15 through 19. The data, numerator, denominator and rate are provided by the Washington State Department of Health, Office of Infectious Disease and Reproductive Health

3. **Section Number:** Form20_Health Status Indicator #05A

Field Name: HSI05A

Row Name:

Column Name:

Year: 2007

Field Note:

The rate is determined by (the number of women ages 15 through 19 with a reported case of Chlamydia divided by women aged 15 through 19). The data, numerator, denominator and rate are provided by the Washington State Department of Health, Office of Infectious Disease and Reproductive Health

HEALTH STATUS INDICATOR MEASURE # 05B

The rate per 1,000 women aged 20 through 44 years with a reported case of chlamydia.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>7.3</u>	<u>7.1</u>	<u>7.7</u>	<u>8.4</u>	<u>8.5</u>
Numerator	<u>7,960</u>	<u>7,857</u>	<u>8,545</u>	<u>9,375</u>	<u>9,573</u>
Denominator	<u>1,089,135</u>	<u>1,102,129</u>	<u>1,113,192</u>	<u>1,120,549</u>	<u>1,125,554</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #05B

Field Name: HSI05B

Row Name:

Column Name:

Year: 2009

Field Note:

The data, numerator, denominator and rate are provided by the Washington State Department of Health, Office of Infectious Disease and Reproductive Health

2. **Section Number:** Form20_Health Status Indicator #05B

Field Name: HSI05B

Row Name:

Column Name:

Year: 2008

Field Note:

The rate is determined by the number of women age 20 through 44 years with a reported case of Chlamydia divided by the population of women age 20 through 44 years. The data, numerator, denominator and rate are provided by the Washington State Department of Health, Office of Infectious Disease and Reproductive Health.

3. **Section Number:** Form20_Health Status Indicator #05B

Field Name: HSI05B

Row Name:

Column Name:

Year: 2007

Field Note:

The rate is determined by (the number of women ages 20 through 44 years with a reported case of Chlamydia divided by women aged 20 through 44 years). The data, numerator, denominator and rate are provided by the Washington State Department of Health, Office of Infectious Disease and Reproductive Health

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: WA

HSI #06A - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and race. (Demographics)*

For both parts A and B: Reporting Year: 2008 Is this data from a State Projection? Yes Is this data final or provisional? Final

CATEGORY TOTAL POPULATION BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	85,673	67,084	3,900	1,748	5,063	574	7,304	0
Children 1 through 4	347,673	273,578	16,083	7,328	21,840	2,382	26,462	0
Children 5 through 9	427,189	342,130	19,787	9,369	25,669	2,994	27,240	0
Children 10 through 14	434,711	352,067	19,564	10,005	26,524	2,979	23,572	0
Children 15 through 19	472,124	381,826	20,059	10,245	33,847	3,547	22,600	0
Children 20 through 24	474,654	383,081	21,412	9,443	38,540	3,850	18,328	0
Children 0 through 24	2,242,024	1,799,766	100,805	48,138	151,483	16,326	125,506	0

HSI #06B - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)*

CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	68,252	17,421	0
Children 1 through 4	284,504	63,169	0
Children 5 through 9	354,451	72,738	0
Children 10 through 14	375,062	59,649	0
Children 15 through 19	413,205	58,919	0
Children 20 through 24	408,841	65,813	0
Children 0 through 24	1,904,315	337,709	0

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: WA

HSI #07A - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and race. (Demographics)*

For both parts A and B: Reporting Year: 2008 Is this data from a State Projection? No Is this data final or provisional? Final

CATEGORY TOTAL LIVE BIRTHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Women < 15	74	59	5	6	0	0	4	0
Women 15 through 17	2,041	1,645	76	97	51	25	147	0
Women 18 through 19	5,097	4,129	277	194	112	56	329	0
Women 20 through 34	67,671	55,077	2,763	1,224	5,513	780	2,314	0
Women 35 or older	13,550	10,638	497	134	1,868	110	303	0
Women of all ages	88,433	71,548	3,618	1,655	7,544	971	3,097	0

HSI #07B - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)*

CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Women < 15	31	43	0
Women 15 through 17	1,196	845	0
Women 18 through 19	3,638	1,459	0
Women 20 through 34	55,892	11,779	0
Women 35 or older	11,838	1,712	0
Women of all ages	72,595	15,838	0

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: WA

HSI #08A - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race. (Demographics)

For both parts A and B: Reporting Year: 2008 Is this data from a State Projection? No Is this data final or provisional? Final

CATEGORY TOTAL DEATHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	475	371	31	12	30	8	23	0
Children 1 through 4	88	57	9	5	6	2	9	0
Children 5 through 9	46	36	2	2	4	0	2	0
Children 10 through 14	56	41	6	0	5	0	4	0
Children 15 through 19	214	170	15	8	7	3	11	0
Children 20 through 24	366	293	14	22	16	8	13	0
Children 0 through 24	1,245	968	77	49	68	21	62	0

HSI #08B - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	371	104	0
Children 1 through 4	72	16	0
Children 5 through 9	42	4	0
Children 10 through 14	52	4	0
Children 15 through 19	179	35	0
Children 20 through 24	316	50	0
Children 0 through 24	1,032	213	0

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: WA

HSI #09A - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)*

Is this data final or provisional? Provisional

CATEGORY Miscellaneous Data BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown	Specific Reporting Year
All children 0 through 19	1,767,550	1,416,685	79,393	38,695	112,943	12,476	107,358	0	2008
Percent in household headed by single parent	24.9	32.1	41.8	61.8	20.3	17.5	32.9	0.0	2008
Percent in TANF (Grant) families	8.2	4.2	29.3	29.0	6.4	0.0	0.0	0.0	2008
Number enrolled in Medicaid	440,103	306,478	58,686	36,222	38,717	0	0	0	2008
Number enrolled in SCHIP	21,359	11,647	464	476	1,300	0	3,213	4,259	2007
Number living in foster home care	9,334	4,891	1,690	2,332	421	0	0	0	2008
Number enrolled in food stamp program	231,849	152,423	39,595	22,495	17,336	0	0	0	2008
Number enrolled in WIC	268,930	191,643	17,421	6,504	9,451	4,381	39,530	0	2009
Rate (per 100,000) of juvenile crime arrests	4,236.0	4,832.0	8,519.0	5,432.0	1,628.0	0.0	0.0	0.0	2007
Percentage of high school drop-outs (grade 9 through 12)	5.1	4.5	7.8	10.1	3.0	6.8	0.0	7.4	2009

HSI #09B - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)*

CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported	Specific Reporting Year
All children 0 through 19	1,495,474	271,896	0	2008
Percent in household headed by single parent	24.5	27.0	0.0	2008
Percent in TANF (Grant) families	7.0	14.8	0.0	2008
Number enrolled in Medicaid	498,443	170,919	0	2008
Number enrolled in SCHIP	12,812	4,865	3,682	2007
Number living in foster home care	8,393	1,784	0	2008
Number enrolled in food stamp program	248,476	92,763	0	2008
Number enrolled in WIC	165,171	103,759	0	2009
Rate (per 100,000) of juvenile crime arrests	0.0	0.0	0.0	2007
Percentage of high school drop-outs (grade 9 through 12)	0.0	7.2	0.0	2009

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: WA

HSI #10 - Demographics (Geographic Living Area) *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*

Reporting Year: 2008 Is this data from a State Projection? No Is this data final or provisional? Final

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	<u>1,167,447</u>
Living in urban areas	<u>14,016,585</u>
Living in rural areas	<u>171,691</u>
Living in frontier areas	<u>124,554</u>
Total - all children 0 through 19	<u>14,312,830</u>

Note:

The Total will be determined by adding reported numbers for urban, rural and frontier areas.

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: WA

HSI #11 - Demographics (Poverty Levels) *Percent of the State population at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2008 Is this data from a State Projection? No Is this data final or provisional? Final

POVERTY LEVELS	TOTAL
Total Population	6,587,600.0
Percent Below: 50% of poverty	9.5
100% of poverty	17.7
200% of poverty	33.5

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: WA

HSI #12 - Demographics (Poverty Levels) *Percent of the State population aged 0 through 19 at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2008 Is this data from a State Projection? No Is this data final or provisional? Final

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	<u>1,766,429.0</u>
Percent Below: 50% of poverty	<u>11.2</u>
100% of poverty	<u>21.7</u>
200% of poverty	<u>40.8</u>

FORM NOTES FOR FORM 21

In 2003 a new birth certificate form was implemented. It collects some information differently, and caution should be used in interpreting year to year changes from 2002-2003.

Notes:

HSI 06A & 06B: The source of this demographic data is the Washington State Center for Health Statistics, accessed via Community Health Assessment Tool (CHAT).

HSI 07A & 07B: The source of this data is the Washington State Center for Health Statistics, accessed via Community Health Assessment Tool (CHAT).

HSI 08A & 08B: The 2008 Death Certificate now includes the field of "more than one race reported". The source of this data is the Washington State Center for Health Statistics, Death Files, accessed via Community Health Assessment Tool (CHAT).

HSI 10: Census 2000 data was used for this data.

HSI 11 & 12: Data were gathered from the 2008 Washington State Population Survey, Office of Financial Management Forecasting Division FPL is determined by using Family Income as a measure. The Washington State Population Survey is conducted every two years so new data for 2008 are not available.

FIELD LEVEL NOTES

1. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_SingleParentPercent
Row Name: Percent in household headed by single parent
Column Name:
Year: 2011
Field Note:
These data come from the 2008 Washington Population Survey. This survey is conducted every two years. Data reported is from 2008. No new data for 2009 is available.
2. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_TANFPercent
Row Name: Percent in TANF (Grant) families
Column Name:
Year: 2011
Field Note:
DSHS Client Services have changed the way they report racial categories. No multiple race category is available. There are no unknowns in their data reporting.
3. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_MedicaidNo
Row Name: Number enrolled in Medicaid
Column Name:
Year: 2011
Field Note:
DSHS Client Services have changed the way they report racial categories. No multiple race category is available. There are no unknowns in their data reporting.
4. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_SCHIPNo
Row Name: Number enrolled in SCHIP
Column Name:
Year: 2011
Field Note:
As of June 2010 DSHS Client Services database is unable to extract the number of kids enrolled in SCHIP program. Latest data from 2007 is being reported until situation can be rectified
5. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_FoodStampNo
Row Name: Number enrolled in food stamp program
Column Name:
Year: 2011
Field Note:
DSHS Client Services have changed the way they report racial categories. No multiple race category is available. There are no unknowns in their data reporting.
6. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_DropOutPercent
Row Name: Percentage of high school drop-outs (grade 9 through 12)
Column Name:
Year: 2011
Field Note:
No data on children reporting more than one race is available.
7. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_SingleParentPercent
Row Name: Percent in household headed by single parent
Column Name:
Year: 2011
Field Note:
These data come from the 2008 Washington Population Survey. This survey is conducted every two years. Data reported is from 2008. No new data for 2009 is available.
8. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_TANFPercent
Row Name: Percent in TANF (Grant) families
Column Name:
Year: 2011
Field Note:
DSHS Client Services have changed the way they report racial categories. No multiple race category is available. There are no unknowns in their data reporting.
9. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_MedicaidNo
Row Name: Number enrolled in Medicaid
Column Name:
Year: 2011
Field Note:
DSHS Client Services have changed the way they report racial categories. No multiple race category is available. There are no unknowns in their data reporting.
10. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_SCHIPNo
Row Name: Number enrolled in SCHIP

Column Name:**Year:** 2011**Field Note:**

As of June 2010 DSHS Client Services database is unable to extract the number of kids enrolled in SCHIP program. Latest data from 2007 is being reported until situation can be rectified

11. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_FoodStampNo
Row Name: Number enrolled in food stamp program
Column Name:
Year: 2011
Field Note:
DSHS Client Services have changed the way they report racial categories. No multiple race category is available. There are no unknowns in their data reporting.
12. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_JuvenileCrimeRate
Row Name: Rate (per 100,000) of juvenile crime arrests
Column Name:
Year: 2011
Field Note:
Data on juvenile crime arrests distribute Hispanics according to their race. There are no Hispanic specific data available on juvenile arrests. Most Hispanics are included in the White racial category.
13. **Section Number:** Form21_Indicator 11
Field Name: S11_total
Row Name: Total Population
Column Name:
Year: 2011
Field Note:
Number obtained from OFM September 2009 population forecast
14. **Section Number:** Form21_Indicator 12
Field Name: S12_Children
Row Name: Children 0 through 19 years old
Column Name:
Year: 2011
Field Note:
Number obtained from OFM September 2009 population forecast
15. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_FosterCare
Row Name: Number living in foster home care
Column Name:
Year: 2011
Field Note:
DSHS Client Services have changed the way they report racial categories. No multiple race category is available. There are no unknowns in their data reporting.
16. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_FosterCare
Row Name: Number living in foster home care
Column Name:
Year: 2011
Field Note:
DSHS Client Services have changed the way they report racial categories. No multiple race category is available. There are no unknowns in their data reporting.

FORM 11
TRACKING PERFORMANCE MEASURES
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]
STATE: WA

Form Level Notes for Form 11

None

STATE PERFORMANCE MEASURE # 1 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

The percent of pregnancies (live births, fetal deaths, abortions) that are unintended.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					
Data Source					
Is the Data Provisional or Final?					

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	51	51	51	51	51
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

Field Level Notes

None

STATE PERFORMANCE MEASURE # 2 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

Percent of children 6-8 years old with dental carries experience in primary and permanent teeth.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator	_____	_____	_____	_____	_____
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Data Source					
Is the Data Provisional or Final?					

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator					
Numerator	While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.				
Denominator					

Field Level Notes

None

STATE PERFORMANCE MEASURE # 3 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

The percent of children who received a standardized developmental screening.

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator	_____	_____	_____	_____	_____
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Data Source					
Is the Data Provisional or Final?					

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

Field Level Notes

None

STATE PERFORMANCE MEASURE # 4 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

The degree to which state has assisted in planning and implementing comprehensive, coordinated care in order to develop an integrated system of care for children, birth to eight.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator	_____	_____	_____	_____	_____
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Data Source	_____	_____	_____	_____	_____
Is the Data Provisional or Final?					

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator	_____	_____	_____	_____	_____
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

Field Level Notes

None

STATE PERFORMANCE MEASURE # 5 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

Percent of households with children (0-18yrs) in which the reporting adult has an Adverse Childhood Experience (ACE) score of 3 or more.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator	_____	_____	_____	_____	_____
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Data Source					
Is the Data Provisional or Final?					

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator					
Numerator	While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.				
Denominator					

Field Level Notes

None

STATE PERFORMANCE MEASURE # 6 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

Identify health disparities, develop and implement interventions to address disparities, and evaluate the effectiveness of interventions in achieving health equity.

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator	_____	_____	_____	_____	_____
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Data Source					
Is the Data Provisional or Final?					

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	_____ 3	_____ 3	_____ 3	_____ 3	_____ 3
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

Field Level Notes

1. **Section Number:** Form11_State Performance Measure #6

Field Name: SM6

Row Name:

Column Name:

Year: 2009

Field Note:

This measure is the average score given by the various participating sections in the Office of Maternal and Child Health of the Washington State Department of Health, Community and Family Health Division. Each section self-evaluated and reported the following scores.

Scale is 1 - 3; 3 is the highest score possible.

STATE PERFORMANCE MEASURE # 7 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

Decrease the rate of infant mortality among the Native American population.

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					
Data Source					
Is the Data Provisional or Final?					

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

Field Level Notes

None

FORM 12
TRACKING HEALTH OUTCOME MEASURES
[SECS 505 (A)(2)(B)(iii) AND 506 (A)(2)(A)(iii)]
STATE: WA

Form Level Notes for Form 12

None

FORM 16
STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET
STATE: WA

SP(New for Needs Assessment cycle 2011-2015) # 1

PERFORMANCE MEASURE:	The percent of pregnancies (live births, fetal deaths, abortions) that are unintended.
STATUS:	Active
GOAL	Reduce the number of unplanned pregnancies.
DEFINITION	<p>THIS SPM IS A CONTINUATION FROM SPM 01 IN THE 2005-2009 NEEDS ASSESSMENT.</p> <p>Numerator: Numerator: Estimate of all unintended births from PRAMS data, similar proportion of fetal deaths, plus all abortions.</p> <p>Denominator: Denominator: All live births and fetal deaths plus abortions</p> <p>Units: 100 Text: Percent</p>
HEALTHY PEOPLE 2010 OBJECTIVE	<p>Related to Healthy People 2010 Objective 9-1.</p> <p>Related to Objective 9-1: Increase the proportion of pregnancies that are intended to 70%. (Baseline 51% of all pregnancies among females 15-44 years were intended in 1995.)</p>
DATA SOURCES AND DATA ISSUES	PRAMS and WA State Center for Health Statistics abortion data files. This estimate assumes all abortions are the result of unintended pregnancy and that the proportion of fetal deaths which are unintended is the same as the proportion of the live births. A small percentage of abortions will be due to fetal or maternal condition and not the result of unintended pregnancy.
SIGNIFICANCE	Unintended pregnancy is correlated with late or inadequate prenatal care, low birth weight, neonatal death, domestic violence, child abuse, and exposure of the fetus to harmful substances like tobacco, alcohol and other drugs. It is associated with social and economic co-factors such as economic hardship, marital dissolution, failure to achieve educational goals, and spousal abuse. This is a measure of family planning.

PERFORMANCE MEASURE:	Percent of children 6-8 years old with dental carries experience in primary and permanent teeth.
STATUS:	Active
GOAL	Reduce the percent of children 6-8 years old with dental carries experience in primary and permanent teeth to the Healthy People 2010 goal of 43% (2009 baseline is 59.0%). Although the national goal will be sought it is important to remember Washington State children currently suffer substantially from dental decay as compared to the nation. The state Oral Health program is working on the promotion of water fluoridation and sealants to achieve the HP 2010 target.
DEFINITION	<p>THIS SPM IS A CONTINUATION FROM SPM 06 IN THE 2005-2009 NEEDS ASSESSMENT.</p> <p>Numerator: Numerator: Children 6-8 years old with dental carries experience in primary and permanent teeth.</p> <p>Denominator: Denominator: Children 6-8 years old</p> <p>Units: 100 Text: Percent</p>
HEALTHY PEOPLE 2010 OBJECTIVE	<p>Related to Healthy People 2010 Objective 21-1b</p> <p>Reduce the proportion of children with dental carries experience in their primary and permanent teeth to 42%. (Baseline: 59% of children aged 6 to 8 years had dental carries experience in the years 2005-2009).</p>
DATA SOURCES AND DATA ISSUES	In order to track the trend of decay experience in resident children, the results of the Washington State Smile Survey from years 1994, 2000, 2005 and 2010 will be utilized. Additionally, Washington State's oral health surveillance system will also provide information. Through these data sources, better monitoring and information distribution about decay experience will be achieved.
SIGNIFICANCE	Dental carries experience in 6-8 year olds is a well-known measure of total oral health status. Its reduction has been recommended by the CDC, and is one of the objectives of the national Healthy People document. As progress is made, the heightened awareness and the identification of this new measure is very meaningful to Washington State. Challenges in the accomplishment of this measure include recent significant budget cuts to the oral health program and not being ranked high in the two most cost-effective preventive measures for dental decay: traditionally observed low rates of water fluoridation, and more recently, a decline in the use of school based dental sealant programs. As a consequence it is expected that Washington children will continue to suffer from substantial dental decay rates, as reflected in the results of the 2005 Smile Survey. The state oral health program is taking serious steps towards improving this situation, and it will take a lot of effort and collaboration with partners to reverse this situation. Despite these challenges, confidence remains that a difference and improvement in the lives of Washington children will be attained.

PERFORMANCE MEASURE:	The percent of children who received a standardized developmental screening.
STATUS:	Active
GOAL	Increase the rate of universal standardized developmental screening in children at accepted intervals during health care visit.
DEFINITION	<p>Developmental screening is defined as a brief assessment of a child using a standardized screening instrument to determine overall developmental status.</p> <p>Numerator: Parent completed Standardized Developmental and Behavioral Screening tool at request of health care provider. Tool asked about child's speech, understanding of language and social interactions,. (NSCH Indicator 4.16)</p> <p>Denominator: Children age 10 months-5 years who had a health care visit in the past 12 months. (NSCH)</p> <p>Units: 100 Text: Percent</p>
HEALTHY PEOPLE 2010 OBJECTIVE	<p>NA</p> <p>There are no HP 2010 objectives related to developmental screening of young children. However, there are currently two proposed objectives for Healthy People 2020. These are: EMC HP2020-2: (Developmental) Increase the proportion of children who are ready for school in all five domains of healthy development. EMC HP2020-4: Increase the percentage of children with disabilities, birth through age 2, receiving early intervention services in home or community-based settings</p>
DATA SOURCES AND DATA ISSUES	The National Survey of Children's Health (NSCH) is the data source for this measure. NSCH is a telephone survey administered to a random sample of households with approximately 1800 interviews collected per state. Responses are weighted to represent the population of children 0-17 years. The developmental screening questions were added to the survey in 2007 after development and testing by the Child and Adolescent Health Measurement Initiative. The development of the questions was in response to the July 2006 American Academy of Pediatrics statement on Identify Infants and Young Children with Developmental Disorders in the Medical Home. The Survey is scheduled to be administered again in 2011, so new data for this measure are not anticipated until 2013, however, we are estimating a 5% increase in screening per year.
SIGNIFICANCE	While there have been successful partnerships to implement improved developmental screening and referral processes in a number of individual primary health care practices, communities and other childhood settings, there has not been a strategic statewide effort to facilitate a universal system of childhood developmental screening and referral. Children with significant delays must be identified as early as possible so that opportunities for intervention will not be missed and school readiness can be achieved. Improving standardized developmental screening during a health care visit is an initial step in building a universal system that both early education and medical providers will use. Over the long term, we plan to develop a system that both provides screening tools and helps link families to resources as well as facilitates tracking in order to evaluate who is being screened, referred and receiving additional services.

PERFORMANCE MEASURE:	The degree to which state has assisted in planning and implementing comprehensive, coordinated care in order to develop an integrated system of care for children, birth to eight.
STATUS:	Active
GOAL	To assure access to integrated community systems of care for children, birth to eight.
DEFINITION	<p>This is a new SPM. It is the sum of the ratings of 8 elements. Four elements address defined activities in the area of collaboration and coordination. Four elements address various ways of providing support to communities. Each element is rated on a scale from 0-3 (0=not met; 1=partially met; 2=mostly met; 3=completely met). The highest score possible for this SPM is 24.</p> <p>Numerator: Not applicable</p> <p>Denominator: Not applicable</p> <p>Units: Yes Text: Text</p>
HEALTHY PEOPLE 2010 OBJECTIVE	<p>Related to Objective 16.23</p> <p>Increase the proportion of states and jurisdictions that have service systems for all children, including children with or at risk for chronic and disabling conditions as required by Public Law 101-239.</p>
DATA SOURCES AND DATA ISSUES	Data will come from the Maternal, Infant, Child, and Adolescent Health section
SIGNIFICANCE	Families and service agencies have identified major challenges confronting families in accessing coordinated health and related services that families need. Differing eligibility criteria, duplication and gaps in services, inflexible funding streams and poor coordination among service agencies are concerns across most states. This effort should provide model strategies for addressing these issues.

PERFORMANCE MEASURE:	Percent of households with children (0-18yrs) in which the reporting adult has an Adverse Childhood Experience (ACE) score of 3 or more.
STATUS:	Active
GOAL	Assess optimal mental health and healthy relationships through Adverse Childhood Experiences data.
DEFINITION	<p>This measure assesses the percentage of households with children (0-18yrs) in which the reporting adult has an Adverse Childhood Experiences (ACE) score of 3 or more.</p> <p>Numerator: Numerator: The weighted population estimate of the number of adults with at least one child (0-18 years) in the household and ACE scores of 3 or more</p> <p>Denominator: Denominator: The total weighted population estimate of the number of adults in households with children (0-18 years)</p> <p>Units: 100 Text: Percent</p>
HEALTHY PEOPLE 2010 OBJECTIVE	<p>Related to Healthy People 2010 Objective 9-1</p> <p>Increase the proportion of pregnancies that are intended to 70%. (Baseline 51% of all pregnancies among females 15-44 years were intended in 1995.)</p>
DATA SOURCES AND DATA ISSUES	<p>DATA SOURCE: This data is gathered in the Behavioral Risk Factor Surveillance System (BRFSS) through inclusion Adverse Childhood Experiences module (set of questions) developed by the Centers for Disease Control and Prevention. In 2009, the ACE module questions were asked of a sample of 6,000 adults in WA. DATA ISSUES: The survey does not reach people living in group quarters (dormitories, barracks, hospitals, prisons, group homes), people who have no telephone, people who cannot communicate by telephone or people who speak only languages other than English or Spanish. The survey also does not include people who refuse to answer the questions.</p>
SIGNIFICANCE	Using ACE data reflects a public health approach to mental health, looking at multiple determinants (risk factors). High ACE scores have been shown to correlate with high rates of depression and suicide.

PERFORMANCE MEASURE:	Identify health disparities, develop and implement interventions to address disparities, and evaluate the effectiveness of interventions in achieving health equity.
STATUS:	Active
GOAL	Assess internal efforts to identify health disparities and work toward achieving health equity.
DEFINITION	<p>THIS SPM IS A CONTINUATION FROM SPM 10 IN THE 2005-2009 NEEDS ASSESSMENT</p> <p>Numerator: Numerator: The numerator is the sum of the self-assessment scores from each section within the Office of Maternal and Child Health.</p> <p>Denominator: Denominator: The denominator is the total number of sections which completed a self assessment</p> <p>Units: Yes Text: Text</p>
HEALTHY PEOPLE 2010 OBJECTIVE	NA
DATA SOURCES AND DATA ISSUES	The measure is an average of scores from each section. For example, each section will conduct a self assessment and determine how many of the eight criteria it meets. Each section receives a score of 1, 2, or 3 depending on how many of the eight selected criteria it meets: 1= meets <4 criteria, 2= meets 4 to 7 of the criteria, 3= meets all 8 criteria. The scores are averaged to reach an office-wide score. Please see field notes for the criteria.
SIGNIFICANCE	Setting standards and expectations for identifying and addressing health disparities will hold each section within the Office of Maternal and Child Health accountable to the "Health Equity" priority.

PERFORMANCE MEASURE:	Decrease the rate of infant mortality among the Native American population.
STATUS:	Active
GOAL	Improve Native American maternal and infant health outcomes and reduce health disparities.
DEFINITION	<p>Native American infant mortality rate per 1,000 live births.</p> <p>Numerator: Number of deaths to Native American children less than one-year old</p> <p>Denominator: Total number of live births to Native Americans</p> <p>Units: 1000 Text: Rate</p>
HEALTHY PEOPLE 2010 OBJECTIVE	16:1 Reduce fetal and infant deaths.
DATA SOURCES AND DATA ISSUES	Mortality Table F6 reported in the Washington State Vital Statistics Report, from linked Birth and Death Certificate files.
SIGNIFICANCE	Native Americans are at high risk for poor birth outcomes. In Washington State serious health disparities exist in birth outcomes for Native Americans. Addressing infant mortality in this population will decrease these health disparities.

